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COVER LETTER

TO: Registration Division of	n Section Corporations	•	
SUBJECT: 124	4 NW 32 ST LLC		
SUBJECT:	Name of Lir	nited Liability Company	
The enclosed Articles	s of Amendment and fee(s) are sul	bmitted for filing.	
Please return all corre	espondence concerning this matter	to the following:	
	Ralph Padron		
	Name of Person		
	PADRON & ASSOCIAT	ES, INC.	
		Firm/Company	
	2095 W 76TH ST - SUIT	E 102	
		Address	
	2095 W 76TH ST - SUITE 102		
	_	City/State and Zip Code	
		-	ification)
For further information	on concerning this matter, please of	call:	
Ralph Padron		305 818-0404 at ()	
Nan	ne of Person		ne Telephone Number
Enclosed is a check for	or the following amount:		
■ \$25.00 Filing Fee	: \$30.00 Filing Fec & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (udditional copy is enclosed)
Mailing Add		<u>Street Address:</u> Registration Se	ection
	f Corporations	Division of Con	
P.O. Box 6		The Centre of T	Γallahassec
Tallahasse	e, FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1244 NW 32 ST LLC

(Name of the Lim	ited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited I Florida document number		12/16/2020	_ and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability company here	2:	
The new name must be distinguishable and contain the	words "Limited Liability Company," the des	ignation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		
		TACE A	2023 S
Enter new mailing address, if applicable:		 	
(Mailing address MAY BE A POST OFFICE BOX)			19
		<u>a</u>	<u>A</u> 9
B. If amending the registered agent and/or agent and/or the new registered office addre		ords, enter the name o	•
Name of New Registered Agent:	PADRON & ASSOCIATES, INC.		
New Registered Office Address:	2095 W 76TH ST - SUITE 102		
	Enter Florida	street address	
	HIALEAH	, Florida <u>33016</u>	
	Ciţv		Zip Code
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as registere provisions of all statutes relative to the prop			

If Changing Registered Agent, Signature of New Registered Agent

accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability

company has been notified in writing of this change.

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			□Add
			□Change
			□Remove
			🗆 Add
		·····	□Remove
			Change
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			□Change

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If an effectiv Note: If t	date, if other that we date is listed, the da the date inserted in t 's effective date on	te must be specific an his block does not	nd cannot be prior t meet the applica	o date of filing or m ble statutory filin	ore than 90 days al	otional) fler filing.) Purs this date will i	uant to 605.0 not be listed	0207 (d as t
	d specifies a del Oth day after the			an effective t	ime, at 12:01	l a.m. on t	he earlie	r of:
The 90			2023					
		September 8	., 2023	 _A				
			Qu	_ · Ized representative	of a member			

Page 3 of 3

Filing Fee: \$25.00