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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : NAJMY THOMPSON, P.L.

Account Number : I20090000014 Phone : (941)907-3999 : (941)840-5559 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **4105 4TH ST LLC**

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M. SOLOMON

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COVER LETTER

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TO:	Registration Se Division of Cor					
SUBJEC	4105 4TH S					
		Name of Lim	ited Liability Company			
		Amendment and fee(s) are sub				
			Aaron M. Thomas			
			Name of Person	× · · · · · · · · · · · · · · · · · · ·		
			Najmy Thompson, P.L.			
			Firm/Company			
		1	401 8th Avenue West			2021
		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Address			2021 HAR
Bradenton, FL 34205						ري. دي
City/State and Zip Code						*
		athomas@najmythompson.			32. 30.	AM IO:
			to be used for future annual report t	nonneanou)		:-
For furti	ner information c	oncerning this matter, please c	aii;			
Aaron N	A. Thomas		at ()	748-2216		
	Name o	f Person	Area Code Day	time Telephone Number		
Enclose	d is a check for t	ne following amount:				
₩ \$25	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	[] \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Mailing Address Registration 5		<u>Street Address</u> Registration			

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

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	4105 4TH ST LLC		
(Name of the Limited Lia (A Fig.	bility Company as it now appears orida Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liabilit	y Company were filed on	03/10/2021	and assigned
Florida document number 1.21000101471	···		
This amendment is submitted to amend the following	; :		
A. If amending name, enter the new name of the l	limited liability company her	<u>·e</u> ;	
4105 4TH LLC			
The new name must be distinguishable and contain the words "	Limited Liability Company," the de-	signation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	DRESS)		
	-		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>		
		, , , , , , , , , , , , , , , , , , ,	
B. If amending the registered agent and/or registon agent and/or the new registered office address her		cords, enter the nan	ne of the new registered
Name of New Registered Agent:			
New Registered Office Address:			a ante y y a a sago controlanção terralectura e consensión.
Enter Florida street address			
	City	, Florida	Zip Code
•	City		Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and 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 Changing Registered Agent, Signature of New Registered Agent

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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

Title	Name	Address	Type of Action
****		48 222 AA (B.2220 AB () V A.	🗆 Add
			□Remove
			Change
			DAdd
			□Remove
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			☐ Change
			[]Add
			□Remove
			[]Change
			□Add
			DRemove
			☐ Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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