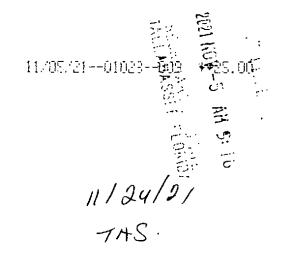
LZI 000 203 977

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Name Change ; Amendment

Office Use Only



900376161839



COVER LETTER

TO:

	gistration Se vision of Cor			-		
elib le <i>e</i> r	609 Biscayı	ne Drive, LEC				
SUBJECT: Name of Limited Liability Company						
The enclose	ed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please retur	n all correspo	endence concerning this matter	to the following:			
		Marissa Smith				
			Name of Person			
		SIM. LLC				
			Firm/Company			
		340 Royal Poinciana Way	Suite 91			
	Address			 		
		Palm Beach, FL 33480				
			City/State and Zip Code			
		smith.marissa@icloud.com				
For further	information c	E-mail address: (oncerning this matter, please co	to be used for future annual report not all:	ilication)		
Marissa Sm	iith		561 414-1699 at ()			
	Name o	f Person	Area Code Daytin	ne Telephone Number		
Enclosed is	a check for th	ne following amount:				
\$25,00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)		
	ailing Addres		<u>Street Address:</u> Registration Se	ection		
	•	forporations	Division of Col			
P.(O. Box 632	7	The Centre of			
Ta	ıllahassee, l	TL 32314	2415 N. Monro	oe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

609 Biscayne Drive, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: SIM. LLC The new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Palm Beach. FL 33480	and assigned
A. If amending name, enter the new name of the limited liability company here: SIM. LLC The new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or Enter new principal offices address, if applicable: 340 Royal Poinciana Way Suite 91 Palm Basely El. 33480	
SIM. LLC The new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or Enter new principal offices address, if applicable: 340 Royal Poinciana Way Suite 91 Polya Book, El. 33480	
The new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or Enter new principal offices address, if applicable: 340 Royal Poinciana Way Suite 91 Palm Book, EL 33480	
Enter new principal offices address, if applicable: 340 Royal Poinciana Way Suite 91 Polya Book, El. 23480	
Enter new principal offices audress, if applicable:	the abbreviation "L.I.,C."
Dalus Dagal, Cl. 22480	
Enter new mailing address, if applicable: 340 Royal Poinciana Way Suite 91	
(Mailing address MAY BE A POST OFFICE BOX) Palm Beach, FL 33480	267
	= = = = = = = = = = = = = = = = = = = =
B. If amending the registered agent and/or registered office address on our records, enter the agent and/or the new registered office address here:	name of the new register
	EX St. 17
Name of New Registered Agent:	
New Registered Office Address: 340 Royal Poinciana Way Suite 91	•••
Enter Florida street address	
Palm Beach . Florid	ia 33480
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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being adde-or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			\Add
			□Remove
			□ Change
			□Remove
			□Change
			□ Add If Remove S
			Change ☐ Add
			□Remove
		 	□Change
			Remove
			Change
			□Add
			□Remove
			□Change

<u> </u>	
	-
	The top
	50 AT 50 AT 1
ive date, if other than the date of filing:	(optional) of filing or more than 90 days after filing.) Pursuant to 605 tatutory filing requirements, this date will not be listed

record is filed.

