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PICK-UP		MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
·	Office Use Only	



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COVER LETTER

TO: **Registration Section Division of Corporations**

Add Authorized Person SUBJECT:

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jonas Zetzel

Name of Person

1703-1705 N MAIN STREET LLC

Firm/Company

1 EAST BROWARD BLVD SUITE 1800

Address

FT. LAUDERDALE, FL 33301

City/State and Zip Code

jonas12976@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

305 43 at (_____) ___ Area Code Jonas Zetzel 432-6975 Name of Person

Daytime Telephone Number

Enclosed is a check for the following amount:

Z \$25.00 Filing Fee	\equiv \$30.00 Filing Fee &		☐ \$60.00 Filing Fee.
	Certificate of Status	Certified Copy	Certificate of Status &
		(additional copy is enclosed)	Certified Copy

Certified Copy (additional copy is enclosed)

Mailing Address: **Registration Section Division of Corporations** P.O. Box 6327

Street Address: **Registration Section Division of Corporations** The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1703-1705 N MAIN STREET LLC

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

The Articles of Organization for this Limited Liability Company were filed on <u>06/17/2021</u> and assigned Florida document number <u>L21000281448</u>

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	· 10
	. 50

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> <u>agent and/or the new registered office address here</u>:

Name of New Registered Agent:	<u> </u>	
New Registered Office Address:		
	Enter Florida street a	ddress
		, Florida
	City	Zıp 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

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
MGR	Jonas Zetzel	9017 Abbott Ave Surfside, FL 33154	🖲 Add 🔍
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: ______ (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated July 12	2021	
	Z	
·	Signature of a member or authorized representative of a member	

Philip C. Rosen, Esq. Authorized Representative

Typed or printed name of signee