Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000290396 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ALVAREZ, SUAZO & ASSOCIATES

Account Number : I20130000076

Phone

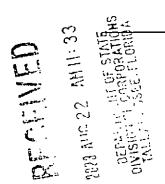
: (305)388-7028

Fax Number

: (305)479-2705

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

Email	Address:	



## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BETTER HORIZON EQUITY LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

AUG 23 2023tlaH T. LEMIEUX

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BETTER HORIZON EQUITY LLC				
(Name of the Limited Liability Compa (A Florida Limited	ny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company	were filed on <u>06/24/2021</u>	and assigned		
Florida document number L21000293049				
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the limited liah</u>	ility company here:			
BEWE 601 Sw 1 St, LLC				
The new name must be distinguishable and contain the words "Limited Ulabi	lity Company," the designation "LLC" or the ab	breviation "L.L.C."		
Enter new principal offices address, if applicable:	1940 NW 93RD AVE			
Principal office address MUST BE A STREET ADDRESS)	DORAL, FL 33172			
		<del></del>		
Enter new mailing address, if applicable:	1940 NW 93RD AVE			
iling address MAY BE A POST OFFICE BON)  DORAL, FL 33172				
	<u> </u>			
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the nam</u>	e of the new register		
Name of New Registered Agent:		22		
New Registered Office Address:		<u> </u>		
	Enter Florida street oddress			

## 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.

Ciţy

2023-06-21 15:23 MDT - +15054792705 PAGE 3/4

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
			□Remove
			Change
			□Add
			□Remove
		·	□Change
			□Add
			□Remove
		<del></del>	□Change
			□Add
			□Remove
	·		□ Change
		<del></del> .	□Add
			□Remove
			□Change
		~~~~	Remove
			T Chance

-		<u>.</u>	1
<del></del>	<del> </del>		<del></del>
E. Effective date, if other than the (If an effective date is listed, the date mu Note: If the date inserted in this b document's effective date on the I	lock does not meet the applica	ble statutory filing require	(optional) 0 days after filing.) Pursuant to 605.0207 (2 ments, this date will not be listed as th
f the record specifies a delayed effecti ecord is filed.	ve date, but not an effective th	ne, at 12:01 a.m. on the ex	rfier of: (b) The 90th day after the
AUGUST 5TH	2023	_ ·	

Typed or printed name of signee