## h21000310510

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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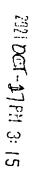
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## zenbusiness

Oct 26, 2021

Florida Secretary of State Division of Corporations 2415 N Monroe St Suite 810 Tallahassee, FL 32303

RE: 367 Marcello Blvd LLC

To Whom It May Concern:

Attached please find the executed <u>CERTIFICATE OF AMENDMENT</u> for the above referenced. Please review and file the attached document on a routine basis.

Once completed please forward the filed confirmation or notification to the address listed below:

ZenBusiness Inc Attention: Kelly Castro 5511 Parkerest Dr., Suite 103 Austin Tx 78731

If you have any questions, please feel free to contact me at 844-493-6249 or at <u>fulfillment@zenbusiness.com</u>.

Thank you,

Kelly Castro ZenBusiness Customer Success

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

367 Marcello Blvd LLC	
(Name of the Limited Liability C (A Florida Lin	ompany as it now appears on our records.) mied Liability Company)
The Articles of Organization for this Limited Liability Com- Florida document number $\frac{1.21000310510}{1.000310510}$ .	pany were filed on 07/07/2021 and assigned
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited</u>	liability company here:
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRES	<u></u>
Enter new mailing address, if applicable: (Mailing <u>address MAY BE A POST OFFICE BOX)</u>	
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	fice address on our records, <u>enter the name of the new registe</u>
Name of New Registered Agent:	
New Registered Office Address:	رم ر
	Enter Florida street address Florida
	City Zip Care

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 design. accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this denument is being filed to merely reflect a change in the registered office address. Thereby 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>	<u>Name</u>	Address	Type of Action
AMBR	Allamanda Partners LLC	312 W 2nd St	
		#1584	□Remove
		Casper, WY 82601	<b>≣</b> Change
MGR	Allamanda Partners LLC	500 East 77th	<b>7.11</b>
		430	
		New York, NY 10162	_
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			□Remove
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fective date, if other than to not effective date is listed, the date is personant in this cument's effective date on the	block does not meet the appl	icable statutory filing	(option: re than 90 days after fil requirements, this d	al) ing.) Pursuant to 605.020 ate will not be listed a:
ecord specifies a delayed effec is filed.	tive date, but not an effective	time, at 12:01 a.m. o	n the earlier of: (b)	The 90th day after the
ted October 26	2021			
	nolas Cordasco Signature of a member or aud	<del></del>		

Filing Fee: \$25.00