121000321669

(Re	questor's Name)	
	dress)	
(Au	uless)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration Sc Division of Cor						
	YWOOD OWNER LLC					
SUBJECT:	Name of Lim	ited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
	GIAMPAOLO GUARINO)				
		Name of Person				
		Firm/Company				
	7425 SW 134TH ST					
		Address				
	PINECREST, FL 33156					
		City/State and Zip Code				
	gguarino07@gmail.com				~	
		to be used for future annual repo	rt notification)		3 178	
For further information c	oncerning this matter, please ca	all:		<u> </u>	1 SEP -7	
GIAMPAOLO GUARI	NO.	at ()			-7	e Labor B
	f Person		Daytime Telephone Number		9 8 8	
Enclosed is a check for the	he following amount:			• • •	O1	
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	f) Certified	e of Status		
Mailing Address Registration 9 Division of C	Section Corporations		n Section f Corporations			
P.O. Box 632	27	The Centre	e of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2655 HOLLYWOOD OWNER LLC		
(Name of the Limited Liability Compa (A Florida Limited I	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 1.21000321669	were filed on 07/14/2021 and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ility Company," the designation "LLC" or the abbreviation "L.L.C."	
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)	2021 SEP -7 PH	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	, t —	tered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	

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.

City

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>	<u>Address</u>	Type of Action
AMBR	GIAMPAOLO GUARINO		□Add
			■Remove
			[]Change
MGR	GIAMPAOLO GUARINO		■Add
			□Remove
			UChange
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			□Remove
			□Change

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ective date, if other than the effective date is fisted, the date inserted in this tument's effective date on the l	st be specific and cannot be prior to date of filit lock does not meet the applicable statutor	(optional) ng or more than 90 days after filing.) Pursuant to 605,020 by filing requirements, this date will not be listed as
cord specifies a delayed effecti s filed.	e date, but not an effective time, at 12:01	a.m. on the earlier of: (b) The 90th day after the
August 26	. 2021	
	·	

Filing Fee: \$25.00