121000359649

(Re	equestor's Name)	
(Ad	ddress)	
(A	ddress)	
(Ci	ity/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Bi	usiness Entity Nar	me)
(De	ocument Number)	
Certified Copies	Certificates	s of Status
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01/13/22--01013--004 **25.00



A. BUTLER
JAN 2 4 2022

COVER LETTER

TO: Registration Se Division of Cor			
1320 IST S	T. N. LLC	,	
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are subt	nitted for filing.	
Please return all correspo	ondence concerning this matter (to the following:	
	GARRETT WILKES		
		Name of Person	
	K&R TAX ACCOUNTING	G SERVICES LLC	
		Firm/Company	
	2853 S. SOSSAMAN RD S	STE A-101	
		Address	
	MESA, AZ., 85212		
		City/State and Zip Code	
	info@kitaxes.com	to be used for future annual report notifi	ication)
For further information of	concerning this matter, please ca		
Garrett Wilkes		480 392-6801 ext	114
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration	Section	Street Address: Registration Sec	
Division of C P.O. Box 633		Division of Corp The Centre of T	•

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1320 1ST ST, N, 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 $\frac{08/10/2021}{1}$ Florida document number L21000359649 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 "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: 2853 S. SOSSAMAN RD., STE, A-101 (Mailing address MAY BE A POST OFFICE BOX) MESA, AZ., 85212 B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Ciny

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	WF Freedom Fund I Managers LLC	2853 S. SOSSAMAN RD., STE A-101	□Add
		MESA, AZ., 85212	□Remove
			🗏 Change
			□Add
			Change
			□Add
			□ Remove
			□Change
			□Add
			□ Remove
			□Change
			□Add
			□Remove
			□Change
			□Add

_____ Remove

	
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<u>te:</u>	edate, if other than the date of filing:
cord s s filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ed	Jan 05 2022
	(a) the
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00