L21000386518

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COVER LETTER

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SUBJECT:	LENOX B	AY APARTMENTS LLC		
3003EC1		Name of Lim	ited Liability Company	
The enclose	ed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retur	n all correspo	ondence concerning this matter	to the following:	
			N ED	Person Apany SS Zip Code ure annual report notification) Code Daytime Telephone Number
			Name of Person	
			Firm/Company	
			Address	
			City/State and Zip Code	
		Address		
For further i	information c	oncerning this matter, please ca	alt:	
	Name o	f Person	at () Area Code Day	time Telephone Number
Enclosed is	a check for th	ne following amount:		
□ \$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	 \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is cuclosed)

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

Street Address: Registration Section Division of Corporations The Centre of Tallahassec

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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LENOX BAY APARTMENTS LLC

ULUALIANY CI STATE

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

The Articles of Organization for this Limited Liability Company	were filed on 08/30/2021	and assigned
Florida document number L21000386518		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabile	ity 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)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter (</u>	the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Flo	orida
	City:	orida Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
		ماله بالمناسبين والمستوار والمستور والمستوار والمستوار والمستوار والمستوار والمستوار والمستوار و

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
AMBR	Karissa Quintero	C/O STRATFORD MANAGEMENT	■Add
		585 BOYLSTON STREET, 4TH FLOOR	□Remove
		BOSTON, MA 02116	Change
			□Remove
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Effective date, if other than the da	te of filing:		·	- <u>-</u>	(option	al)		
f an effective date is listed, the date must be Note: If the date inserted in this block	does not mee	et the applica	to date of filing able statutory	or more than 90 filing requirer) days after fil nents, this d	ing.) Purst late will n	ant to 60 ot be lis	15.0207 sted as t
document's effective date on the Depa	rtment of Stat	te's records.						
			. 12.01			 00.		
	ite, but not an	i effective in	ne, at 12:01 a	i.m. on the ear	lier 01: (b)	The 90th	i day aiti	er the
e record specifies a delayed effective ded								
d is filed.		2024						
e record specifies a delayed effective ded is filed. Dated July 10th		2024						
d is filed.	· · · ·	2024						
d is filed. Dated July 10th	・.		rized represent	ative of a memb	er			

Filing Fee: \$25.00