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| Special Instructions to | Filing Officer: | |
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Office Use Only



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10/19/21 ALLAHASSEE STREET STR

COVER LETTER

| Div | ision of Cor | porations | | |
|--|----------------|--|--|--|
| CHRIECT. | | Oth Ave, LLC | | |
| SUBJECT: Name of Limited Liability Company | | | | |
| The enclosed | d Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please return | all correspo | indence concerning this matter | to the following: | |
| | | Philip Filonenko | | |
| | | | Name of Person | |
| | | 5740 NE 19th Ave, LLC | | |
| | | | Firm/Company | |
| | | 1850 S Ocean Dr. #3901 | | |
| Address | | | | |
| | | Hallandale Beach, FL 330 | 09 | |
| | | | this matter to the following: Name of Person Ave, LLC Firm/Company Dr. #3901 Address Sech, FL 33009 City/State and Zip Code @gmail.com all address: (to be used for future annual report notification) er, please call: at (| |
| | | gregshusterman@gmail.com | | |
| | | E-mail address: (| to be used for future annual report noti | fication) |
| For further in | nformation c | oncerning this matter, please c | all: | |
| Greg Shuste | rman | | | |
| | Name o | f Person | Area Code Daytim | e Telephone Number |
| Enclosed is a | a check for th | he following amount: | | |
| ■ \$ 25.00 I | Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | Certified Copy | Certificate of Status & Certified Copy |
| 34 | ilina Addmo | | Street Address | |

TO:

Registration Section

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| 5/40 NE 19th Ave. ELC (Name of the Limited Liability Compa | ny as it now appears on our records.) | |
|--|--|---------------------------|
| (A Florida Cimited) | Liability Company) | |
| The Articles of Organization for this Limited Liability Company | were filed on Scpt 10, 2021 | and assigned |
| Florida document number L21000402512 | mitted to amend the following: , enter the new name of the limited liability company here: inguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." ffices address, if applicable: 1850 S Ocean Dr. #3901 | |
| This amendment is submitted to amend the following: | | |
| ricles of Organization for this Limited Liability Company were filed on Sept 10, 2021 and assigned a document number L21000402512 and adocument number L21000402512 and adocument is submitted to amend the following: amending name, enter the new name of the limited liability company here: In a mending name, enter the new name of the limited Liability Company." the designation "LLC" or the abbreviation "LLC" or the abbreviation "LLC" new principal offices address, if applicable: In a lipit office address MUST BE A STREET ADDRESS) In a memailing address, if applicable: In a address MAY BE A POST OFFICE BOX) In a lipit office address MAY BE A POST OFFICE BOX In a lipit office address on our records, enter the name of the the registered agent and/or registered office address on our records, enter the name of the the registered | | |
| is amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: It we name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" after new principal offices address, if applicable: It incipal office address MUST BE A STREET ADDRESS) It allandale Beach, FL 33009 If amending the registered agent and/or registered office address on our records, enter the name of the frew registered ent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida | | |
| he new name must be distinguishable and contain the words "Limited Liabi | lity Company," the designation "LLC" or | the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | 1850 S Ocean Dr. #3901 | <u> </u> |
| Principal office address MUST BE A STREET ADDRESS) | Hallandale Beach, FL 33009 | |
| | | |
| | | 21 Oc |
| Enter new mailing address, if applicable: | | No. |
| Mailing address MAY BE A POST OFFICE BOX) | Hallandale Beach, FL 33009 | |
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| | 11 | ~~ |
| If amending the registered agent and/or registered office a igent and/or the new registered office address here: | address on our records, enter the | name of the wew registere |
| | | |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| in the second se | Enter Florida street address | |
| | | |
| | City | Zip Code |

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 | Philip Filonenko | 1850 S Ocean Dr. #3901 | ■Add |
| | | Hallandale Beach, FL 33009 | □Remove |
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| Effective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be | prior to date of fi | ling or more than 90 da | (optional) sys after filing.) Pursua | nt to 605,020 |
| <u>Note:</u> If the date inserted in this block does not meet the a document's effective date on the Department of State's rec | ipplicable statute cords. | ory filing requiremen | nts, this date will not | the fisted as |
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| e record specifies a delayed effective date, but not an effect | tive time, at 12:0 | I a.m. on the earlie | rof: (b) The 90th o | lay after the |
| ord is filed. | | | | |
| Dated Scpt 30 . 2021 | | | | |
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| Signature of a member or | ; | | | |

Filing Fee: \$25.00