12/18/23, 3:54 PM

Division of Corporations

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(((H23000430437 3)))



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 : (305)444-4994 Phone

Fax Number : (305)328-4774

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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December 19, 2023

FLORIDA DEPARTMENT OF STATE

EXPRESS CORPORATE FILING SERVICE INC.

,

SUBJECT: 459 NE BISCAYNE, LLC

REF: L21000430635

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Must list the type of action to be taken for the authorized person listed.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

STANTON H ROBERTS FAX Aud. #: H23000430437
Regulatory Specialist III Letter Number: 623A00028892

To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

From: Yanet Avila

459 NE BISCAYNE, LLC			
(Name of the Limited Lighil) (A Florida	ity Company as it now app a Limited Liability Compan	enrs on our records.)	
The Articles of Organization for this Limited Liability C Florida document number L21000430635	Company were filed on	09/30/2021	_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ited liability company	here:	
The new name must be distinguishable and contain the words "Lim	ited Liability Company," th	e designation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDR	(ESS)		
	*************************************		<u> </u>
Enter new mailing address, if applicable:			·
(Mailing address MAY BE A POST OFFICE BOX)	<u></u>		
			:
B. If amending the registered agent and/or registered agent and/or the new registered office address here: Name of New Registered Agent:	l office address on ou	records, enter the name o	of the new registered
New Registered Office Address:	Enter F	lorida street address	
	City	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered	Agent:		
I hereby accept the appointment as registered agent of provisions of all statutes relative to the proper and confections of all statutes relative to the proper and confect the obligations of my position as registered ago being filed to merely reflect a change in the registered company has been notified in writing of this change.	omplete performance ent as provided for it	of my duties, and I am fun Chapter 605, F.S. Or, if	ulliar with and this document is
	If Changing Registered	Agent, Signature of New Regist	ered Agent

To: . Page: 5 of 6 2023-12-19 20:22:08 GMT 13053284774 From: Yanet Avila

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	Alfonso Hoyos Martinez	2018 Driscoll Street	₩Add
		Houston, Texas 77019	□Remove
			☐ Change
			□Add
			DRemove
			OChange
			DAdd
			DRemove
			Change
			□Add
			DRemove
			□ Clunge
			DAdd
			□Remove
			☐ Change
			□Reniove
			□Change

To:

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E. Effective date, if other than t (If an effective date is listed, the date in <u>Note:</u> If the date inserted in this document's effective date on the	block does not meet the applica	ible statutory filing requirements, th	tional) er filing.) Pursuant to 605.0207 (3)(t his date will not be listed as the
If the record specifies a delayed effect record is filed.	tive date, but not an effective tir	ne, at 12:01 a.m. on the earlier of:	(b) The 90th day after the
Dated December 18	2023		

Signature of a member or authorized representative of a member

Typed or printed name of signee

Jorge Isaac