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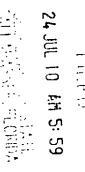
	(Requestor's Name)
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PICK-UF	WAIT MAIL
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	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:





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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Cor	rporations					
LaDavis V	illas LLC					
SUBJECT:Name of Limited Liability Company						
		·				
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
	Averialle L. Davis					
		Name of Person				
	LaDavis Villas LLC					
		Firm/Company				
	3750 Gunn Highway Suite 306					
		Address				
	Tampa, Florida 33618					
		City/State and Zip Code				
	llc@tadavisvillas.com					
	E-mail address: (to be used for future annual report noti	fication)			
For further information c	oncerning this matter, please c	all:				
Averialle L. Davis		877 241-4847				
Name of Person		at () Area Code Daytim	e Telephone Number			
Enclosed is a check for th	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 Address: Registration Section Division of Corporations		<u>Street Address:</u> Registration Sec Division of Cor				
P.O. Box 6327		The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LaDavis Villas LLC		
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on October 11 2021	and assigned
Florida document number L21000442878		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liab</u>	oility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or t	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		2.
		5 9
3. If amending the registered agent and/or registered office gent and/or the new registered office address here:	address on our records, <u>enter the</u>	name of the new regis
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Florid	a
	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>	<u>Address</u>	Type of Action
AMBR	Jamal L. Davis	3750 Gunn Highway Suite 306	
		Tampa, Florida 33618	□Remove
			Change
MGR Averialle L. Davis	Averialle L. Davis	3750 Gunn Highway Suite 306	□Add
		Tampa, Florida 33618	□Remove
			□Add
		<u> </u>	Remove
			□Change
			□Add
			□Remove
		-	
			□Remove
			☐ Change
			□ Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Please remove 6421 N Florida Ave Ste D423 Tampa Fl. 33604 New address is 3750 Gunn Highway Suite 306 Tampa, Florida 33618 E. Effective date, if other than the date of filing: 7/1/2024 (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. July 1 2024 Dated ____ Averialle Davis Signature of a member or authorized representative of a member Averialle' Davis

.

Filing Fee: \$25.00

Typed or printed name of signee