L21000501654

Office Use Only



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ALL STALLSEE, FLORIDA

DEC 7

COVER LETTER

TO: Registration of Division of	on Section Corporations	•	
	JGLAS AVENUE LLC	<i>, ·</i>	.••
SUBJECT:	Name of Lis	mited Liability Company	
771 h 1 h 2' 1		Lichard Control	
	es of Amendment and fee(s) are su	-	
Please return all con	respondence concerning this matte	r to the following:	
	Ryan J. Mittauer		
	-	Name of Person	
	The Liles Firm, P.A.		
	-	Firm/Company	
	50 N. Laura Street, Suite	1200	
	_	Address	
	Jacksonville, Florida 322	02	
		City/State and Zip Code	·
	rmittauer@thelilesfirm.com		
For further informat	ion concerning this matter, please	(to be used for future annual report no call:	tineation)
Ryan Mittauer		904 634-1100	
	ume of Person	at () Area Code Daytii	me Telephone Number
Enclosed is a check	for the following amount:		
■ \$25.00 Filing F	ee	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Ac Registrati		Street Address: Registration Se	ection
-	of Corporations	Division of Co	
P.O. Box		The Centre of	
Registrati Division P.O. Box	on Section of Corporations	Registration Se Division of Co The Centre of	ection orporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

8 DOUGLAS AVENUE 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 Co	ompany were file	ed on 11/23/2021		_ and assigned	4. 18
Florida document number L21000501654				<u> </u>	
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limit	ted liability com	ıpany here:			
10 SANCHEZ AVENUE, LLC					
The new name must be distinguishable and contain the words "Limite	ted Liability Compa	my." the designation	"LLC" or the abbre	rviation "L.L.C."	_
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRE	<u>ESS)</u>				
					_
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)					
					_
B. If amending the registered agent and/or registered agent and/or the new registered office address here: Name of New Registered Agent:					itere
Name of New Registered Agent.					
New Registered Office Address:		Enter Florida street a			_
	City		Florida	Zip Code	_
New Registered Agent's Signature, if changing Registered	l Agent:				
I hereby accept the appointment as registered agent as provisions of all statutes relative to the proper and conaccept the obligations of my position as registered age being filed to merely reflect a change in the registered company has been notified in writing of this change.	ind agree to act implete performent as providea	iance of my dutie For in Chapter (es, and Lam fan 605, F.S. Or, if	niliar with and this document i	
	If Changing Regi	istered Agent, Signal	ture of New Regist	ered 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
			□Add
			□Remove
			□Change
			□Remove
			□Change
			□Add
		_000	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			□Change

Effective date, if other than the date of filing: fan effective date, if other than the date of filing: fan effective date is listed, the date must be specific and cannot be prior to date of illing or more than 90 days after filing. I Pursuant to 605 0207 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as Joeument's effective date on the Department of State's records. Precord 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 d is filed. Signature of a member or authorized representative of a member Ryan J. Mittauer, Authorized Representative Excelored programment authorized signer.					
San 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 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as locument's effective date on the Department of State's records. 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 d is filed. Dated September 6 2022					
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Filing Fee: \$25.00