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SECRETARY OF STATE

A. BUTLER MAY 1 0 2022

COVER LETTER

TO:

Registration Section
Division of Corporations

CLUB INCOM	ille Street LLC		
Sobole 1.		ited 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:	
	Jeffrey M Materna		
		Name of Person	
	604 Nashville Street LLC		
		Firm/Company	· · · · · · · · · · · · · · · · · · ·
	PO Box 234		
		Address	
	Oakton, VA 22124		
		City/State and Zip Code	
	jmmaterna@yahoo.com		
	E-mail address: (to be used for future annual report not	tification)
For further information of	concerning this matter, please c	all:	
Jeff Materna		703 935-3399 at ()	
Name o	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	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 Addres Registration		<u>Street Address:</u> Registration Se	ection
Division of C	Corporations	Division of Co	rporations
P.O. Box 632		The Centre of	
Tallahassee,	FL 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF FILED

604 Nashville Street LLC (Name of the Limited Liability Company as it now appears on our re The Articles of Organization for this Limited Liability Company were filed on 12/13/21 LAHASSEE.

Florida document number L21000523005 (A Florida Limited Liability Company) Florida document number L21000523005 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

__, Florida ___

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>	Name	Address	Type of Action
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Remove
			□Change
			□Remove
			Change
			□Add
			□Remove
			Change

Board of i	member consists of one person, Jeffrey M. Materna, who has full power and authority to make decisions
and to act	on behalf of the Company, including the execution of any and all documents.
	
 -	
•	
	if other than the date of filing: 3/1/2Z (ontional)
ective 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 60
	te inserted in this block does not meet the applicable statutory filing requirements, this date will not be lis ective date on the Department of State's records.
	es a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day aft
ed.	
	April 5 ZOZZ
	April 5 Z02Z Signature of a member or aythorized representative of a member
	/ I les M. Hallun