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## **COVER LETTER**

TO: Registration Se Division of Cor		. 4.		
The 97th, L	LC		•	* * *
SUBJECT:		ited Liability Company		<u> </u>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Michael Gentzle			
		Name of Person		
	Coleman, Yovanovich & F	Coester, P.A.		
		Firm/Company		<del></del>
	4001 Tamiami Trail North	. Suite 300		
		Address		22
	Naples, FL 34103			AUG
		City/State and Zip Code		<u> </u>
	realestatesn@yahoo.com	to be used for future annual	report notification	₽
For further information c	oncerning this matter, please c		терогеновневион	22 AUG 31 PH 1: 58
Michael Gentzle			5-3535	
Name o	f Person	at () Area Code	Daytime Teleph	none Number
Enclosed is a check for the	ne following amount:			
■ \$25.00 Filing Fce	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee of Certified Copy (additional copy is enc		S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address		Street A		
Registration Section Division of Corporations		_	ation Section n of Corporati	ons
P.O. Box 632			ntre of Tallaha	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(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 Company were filed on   01/10/2022  Florida document number  01/10/2022	_ and assigned
Florida document number 01/10/2022	_ and assigned
his amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
The 96th, LLC	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbre	eviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	22 A
Inter new mailing address, if applicable:	38 GERT 36 31
Mailing address MAY BE A POST OFFICE BOX)	<b>3</b> 5 m:
munity address mile DE ATOST OFFICE DONY	- 58 B
3. If amending the registered agent and/or registered office address on our records, enter the name or agent and/or the new registered office address here:	of the new regist
Name of New Registered Agent:	
New Registered Office Address:  Enter Florida street address	
, Florida, Florida	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 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	Silviya Noncheva	95 E. Walnut Street	≣Add
		Roselle, IL 60172	□Remove
			□Change
			□ Add
			□Remove
		☐Change	
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ctive date, if other than the dat effective date is listed, the date must be	e of filing:specific and cannot be prior to da		( <b>optional)</b> s after filing.) Pursuant to 605	5.02
e: If the date inserted in this block ument's effective date on the Depar	does not meet the applicable			
	2. 2 2 . 3			
ord specifies a delayed effective da	te, but not an effective time,	at 12:01 a.m. on the earlier	of: (b) The 90th day afte	r th:
i filed.				
August 22	2022			
(DV)-	<u></u>			
	-			

EU E 635.00

Typed or printed name of signee