

L220000029431

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

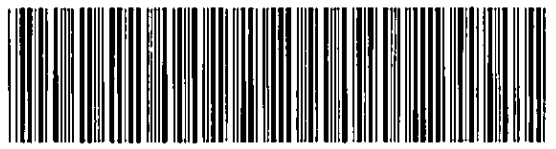
(Document Number)

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TALLAHASSEE, FLORIDA
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TALLAHASSEE, FL

Advanced Incorporating Service

1317 California Street
P.O. Box 20396
Tallahassee, FL 32316

Phone: 850-222-CORP
Fax: 850-575-2724
Email: wlopez@aisincfl.com
Website: www.aisincfl.com

NAME OF ENTITY

354 Paseo Reyes Drive, LLC

FOR OFFICE USE ONLY

PICK ONE:

CERTIFIED COPY PHOTOCOPY C.U.S.

FILING:

CORPORATION LLC LIMITED PARTNERSHIP GENERAL PARTNERSHIP
 FICTITIOUS NAME SERVICEMARK/TRADEMARK AMENDMENT
 FOREIGN QUALIFICATION JUDGMENT LIEN
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APOSTILLE/NOTARY CERTIFICATION REQUEST:

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DATE 8/3/22 TIME _____

Notes: _____

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

AUG -3 PM 5:11

354 PASEO REYES DRIVE, LLC

(Name of the Limited Liability Company as it now appears on file
(A Florida Limited Liability Company))

SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 01/26/2022 and assigned
Florida document number 122000029431.

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:

120 Palencia Village Dr.

(Principal office address MUST BE A STREET ADDRESS)

Suite 115-118

St. Augustine, FL 32095 US

Enter new mailing address, if applicable:

120 Palencia Village Dr.

(Mailing address MAY BE A POST OFFICE BOX)

Suite 115-118

St. Augustine, FL 32095 US

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

Florida

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>	<u>Type of Action</u>
MGR	Jameson Richard	120 Palencia Village Dr.	<input type="checkbox"/> Add
		Suite 115-118	<input type="checkbox"/> Remove
		St. Augustine, FL 32095 US	<input checked="" type="checkbox"/> Change
MGR	Theresa Richard	120 Palencia Village Dr.	<input type="checkbox"/> Add
		Suite 115-118	<input type="checkbox"/> Remove
		St. Augustine, FL 32095 US	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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