## L22000038134

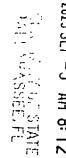
(Requestor's Name)
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## **COVER LETTER**

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

SUBJECT: 3450 Mora	via Ave LLC			
	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
	ondence concerning this matter			
	Courtney Kearns			
		Name of Person	<del></del>	
	3450 Moravia Ave LLC			
		Firm/Company		
	3707 Royal Meadow Road	Address	<del></del>	
		Address		
	Sherman Oaks, CA 91403	C'. (C 14' C )		
	caclark60@ao1.com	City/State and Zip Code		
	_	to be used for future annual report not	fication)	
For further information c	oncerning this matter, please ca	all:		
Courtney Kearns		at (516 ) 3178231 Daytin		
Name o	f Person	Area Code Daytin	ne Telephone Number	
Enclosed is a check for the	ne following amount:			
<b>≅</b> \$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		Street Address:		
Registration Section Division of Corporations		Registration Section Division of Corporations		
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

3450 Moravia Ave LLC		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records Liability Company)	<u>~</u> )
The Articles of Organization for this Limited Liability Company	were filed on 1/18/2022	and assigned
Florida document number 1.22000038134		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3707 Royal Meadow Road	
Principal office address MUST BE A STREET ADDRESS)	Sherman Oaks,CA 91403	
	<del></del>	
Enter new mailing address, if applicable:	3707 Royal Meadow Road	<b>2023 :</b>
Mailing address MAY BE A POST OFFICE BOX)	Sherman Oaks, CA 91403	
		33 6 F
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter t</u>	the name of the new regis
		M N
Name of New Registered Agent:		
New Registered Office Address:		
The magazined Control Madiess.	Enter Florida street address	-
		orida
	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>	Name	Address	Type of Action
			□Add
			□Remove
			☐ Change
		<del></del>	□Add
<u> </u>	T. T. TIANAI / 1		□Remove
	INTENTIONALLY BLANK		□Change
	DL///		□Add
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			□Add
			□Remove
			□Change

11 411	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
lfan e <u>Note</u>	tive date, if other than the date of filing:
reco	ord 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 filed.
Dated	August 23, 2023 , 2023 .
	/K/ M/v
	Signature of a member or authorized representative of a member
	Courtney A. Kearns