L22000088657

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(Requestor's Name)	
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PICK-UP WAIT MAIL	Ī
(Business Entity Name)	
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(Document Number)	
Certified Copies Certificates of Status	
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Special Instructions to Filing Officer:	
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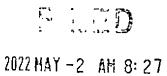
COVER LETTER

TO:

TO: Registration S Division of Co			
41 E 1 EN 18 62 C1765	D STREET, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Luca Di Nunzio		
	<u> </u>	Name of Person	
	Dorcey Law Firm		
		Firm/Company	
	10181 Six Mile Cypress P	kwy, Suite C	
		Address	
	Fort Myers, FL 33966		
		City/State and Zip Code	
	support@dlfregisteredagen		
	E-mail address: (to be used for future annual report not	tification)
For further information	concerning this matter, please c	all:	
Luca Di Nunzio		239 308-1073	
Name	of Person		me Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration		Street Address: Registration So	ection
Division of 0	Corporations	Division of Co	
P.O. Box 63		The Centre of	
Tallahassee,	FL 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



300 E. 3RD STREET, LLC

ESTATE TO STATE OF THE

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Florida document number 1.22000088657		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	33 W Jackson Blvd 200	
(Principal office address MUST BE A STREET ADDRESS)	Chicago, IL 60604-4149	
Enter new mailing address, if applicable:	33 W Jackson Blvd 200	
(Mailing address MAY BE A POST OFFICE BOX)	Chicago, IL 60604-4149	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	nddress on our records, <u>enter th</u>	ie name of the new registered
agent and/or the new registered office address here: Name of New Registered Agent:	nddress on our records, <u>enter th</u>	ie name of the new registered
agent and/or the new registered office address here:	enter the Enter Florida street address	ne name of the new registered
agent and/or the new registered office address here: Name of New Registered Agent:	Enter Florida street address	
Name of New Registered Agent: New Registered Office Address:	Enter Florida street address	idaZip Code
agent and/or the new registered office address here: Name of New Registered Agent:	Enter Florida street address	

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
MGR	Keith A Vogt	33 W Jackson Blvd 200	□Add
		Chicago, IL 60604-4149	□Remove
			■Change
MGR Pamela R Webster	Pamela R Webster	33 W Jackson Blvd 200	
		Chicago, IL 60604-4149	□Remove
			■ Change
			□Remove
		Change	
			□Add
		□Remove	
			□ Change
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			□Change

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(If an effe Note: I	te date, if other than the date of filing:
ie record ord is file	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.
Dated _	March 29, 2022
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00