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SECRETARY OF STATE

A. BUTLER APR 1 2 2022

COVER LETTER

Division of Cor	rporations				
	VEN WATERFRONT REAL F	STATE LLC			
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Loretta Burn				
		Name of Person			
	BLEU HAVEN WATERF	RONT REAL ESTATE LL			
	Firm/Company				
	308 S OLD COUNTY RD	Suite B			
		Address			
	Edgewater, FL 32121				
		City/State and Zip Code			
	lorettaburn@me.com				
		to be used for future annual re	port notification)		
For further information c	oncerning this matter, please c	all:			
Loretta Burn		386 690- at ()	8888		
Name o	f Person		Daytime Telephone Number		
Enclosed is a check for the	ne following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclo	\$60.00 Filing Fec, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Addres Registration S		<u>Street Ado</u> Registrat	l <u>ress:</u> ion Section		
Division of C			of Corporations		

P.O. Box 6327 Tallahassee, FL 32314

Registration Section

TO:

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

BLEU HAVEN WATERFRONT REAL ESTATE LLC

(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	03 MAI	ALLAHASSEE STATE
The Articles of Organization for this Limited Liability Company	were filed on	and assigned
Florida document number L22000110240		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
HAVEN HOLDINGS LB, LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		<u> </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u></u>
D. If any and the state of the		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our record	is, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
Ten registered Office Address.	Enter Florida st	reet 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 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>	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
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_			
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ective date	e, if other than the date of filing: (i	optional)
reffective dat	te is listed, the date must be specific and cannot be prior to date of filing or more than 90 days	after filing.) Pursuant to 605.0203
te: If the da	ate inserted in this block does not meet the applicable statutory filing requirements fective date on the Department of State's records.	s, this date will not be listed as
unicin 5 cm	rective date on the Department of State's records.	
cord specific	ies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of	of: (b) The 90th day after the
s filed.		
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Typed or printed name of signee