L22000130376

(Re	questor's Name)	
(Ad	dress)	
	(4)	
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(Cit	y/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
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(Bu	siness Entity Nam	ne)
(Do	cument Number)	
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Certified Copies	_ Certificates	of Status
Consideration	511 · · · OB' - · · ·	
Special Instructions to	Filing Oπicer:	
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Office Use Only



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05/06/22--01028--007 **25.00

A. RAMSEY MAY -9 2022

> A. RAMSEY MAY -9 2022

RECEIVED

22 MAY -6 PM 2:27

022 HAY -6 AH 10: 5

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

1745 WYNWOOD	LLC_	<u>.</u>	
		 ·	
			
			Art of Inc. File
			LTD Partnership File
			Foreign Corp. File
			L.C. File
			Fictitious Name File
			Trade/Service Mark
			Merger File
			Art. of Amend. File
			RA Resignation
			Dissolution / Withdrawal
			Annual Report / Reinstatement
			Cert. Copy
			Photo Copy
			Certificate of Good Standing
			Certificate of Status
			Certificate of Fictitious Name
			Corp Record Search
			Officer Search
			Fictitious Search
Signature			Fictitious Owner Search
· ·			Vehicle Search
	-		Driving Record
Requested by: SETH			UCC 1 or 3 File
Name	Date	Time	- UCC 11 Search
			UCC !! Retrieval
Walk-In Thom stuffs, GA &		Up	Courier

COVER LETTER

Registration Section

TO:

Division of C	Corporations		
1745 WY	/NWOOD LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	ELAN DAVYDOV		
		Name of Person	
	-	Firm/Company	
	1160 KANE CONCOURS	SE, SUITE 305	
		Address	
	BAY HARBOR ISLAND	S, FL 33154	
		City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	michael.abadi@triplefive.co	ont to be used for future annual report no	
		·	ancation)
For further information	n concerning this matter, please c	all:	
Michael Abadi		305 987-2923	
Name	e of Person	at () Area Code Dayti	me Telephone Number
Enclosed is a check for	the following amount:		
■ \$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 Addi		Street Address:	
Registration Division of	Corporations	Registration Se Division of Co	
P.O. Box 63	327	The Centre of	Tallahassee
Tallahassee	, FL 32314	2415 N. Monro	pe Street, Suite 810

Tallahassee, FL 32303

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

FILED 2022 MAY -6 AM 10: 51

1745 WYNWOOD 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	were filed on $\frac{3/30/2023}{2}$	and assigned
Florida document number L22000130376	·		
his amendment is submitted to amend the following	llowing:		
A. If amending name, enter the new name	of the limited liab	oility company here:	
he new name must be distinguishable and contain the		(Co. 2)	' witch at the 2 2 miles."
ne new name must be distinguishable and contain the	words "Limited Llabi		
Enter new principal offices address, if applicable:		1160 KANE CONCOURSE, SUITE 301	
Principal office address MUST BE A STRE	ET ADDRESS)	BAY HARBOR ISLA	NDS, FL 33154
Inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)		1160 KANE CONCO	URSE, SUITE 301
		BAY HARBOR ISLA	NDS, FL 33154
		<u></u>	
3. If amending the registered agent and/or	registered office	address on our record	s enter the name of the new register
igent and/or the new registered office addr		address on our record.	enter the name of the new register
Name of New Registered Agent:	BRUCE HORN	NSTEIN	
New Decisional Office Address	6961 INDIAN	CREEK DRIVE	
New Registered Office Address:		Enter Florida stre	pet address
	МІАМІ ВЕАС	Ή	Florida
		City	, Florida Zip Code

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.

Bruce Hornstein

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>	Address	Type of Action
MBR	ELAN DAVYDOV	1160 KANE CONCOURSE, SUITE 305	🗀 Add
		BAY HARBOR ISLANDS, FL 33154	\(\exists \) Remove
		 	Change
MBR MICHELLE LERNER	2201 EAST COUNTRY CLUB DR, SUITE 2204	🗆 Add	
		AVENTURA, FL 33180	\exists Remove
			DChange
MGR	MICHAEL ABADI	1160 KANE CONCOURSE, SUITE 301	≣ Add
		BAY HARBOR ISLANDS, FL 33154	□Remove
			🗀 Change
MGR	NATHAN YADGAR	1160 KANE CONCOURSE, SUITE 301	≣ Add
		BAY HARBOR ISLANDS, FL 33154	□Remove
			□Change
			□Add
		□Remove	
		□Change	
			□ Add
		·	□Remove
			Change

Page 2 of 3

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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If an eff Note:	ive date, if other than the date of filing:
The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
	5/5/22
Dated	Elan Davydov Signature of a member or authorized representative of a member
	Elan Davylov Signature of a member or authorized representative of a member
	Signature of a member of authorized representative of a member
	ELAN DAVYDOV

Page 3 of 3

Filing Fee: \$25.00