L22000/37/82

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2022 NOV 21 PM 4: 36 SECHETARY OF STATE

2/8/23

TO: Registration Section Division of Corporations	
SUBJECT: Michayia High	htawar LLC ned Liability Company
The enclosed Articles of Amendment and fee(s) are subm	nitted for filing.
Please return all correspondence concerning this matter to	o the following:
Rictaria	Felisha Jean-Baptiste Name of Person
Rictaria	- Hightower LLC Firm/Company
9767 Mulbe	Cry Marsh Lane Address
	City/State and Zip Code
Cictavia high E-mail address: Ac	be used for future annual report notification)
For further information concerning this matter, please cal	H:
Rictaria Jean-Baptiste Name of Person	at (727) 492 - 8058 Area Code Daytime Telephone Number
Enclosed is a check for the following amount: \$\sum \\$\\$\\$\\$\\$\$ \$25.00 Filing Fee Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section	Street Address: Registration Section

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

TO ARTICLES OF ORGANIZATION OF

Mictaria	light.	ntower L	LC_		
(<u>Name of the Limited</u> (A	Liability Compa Florida Limited I	ny as it now appears of liability Company)	our records.)		
The Articles of Organization for this Limited Liab	ility Company	were filed on3	/21/2022	🚣 and assig	ned
This amendment is submitted to amend the follow	ing:				
A. If amending name, enter the new name of the					
Richavia Jean- The new name must be distinguishable and contain the word	Brotis	te LLC			
The new name must be distinguishable and contain the word	ls "Limite <mark>d</mark> Liabil	ity Company," the desig	nation "LLC" or the a	abbreviation "L.L.	C."
Enter new principal offices address, if applicab	le:	9767 M Ruskin, F	alperry h	Jarsh L	<u>300</u>
(Principal office address MUST BE A STREET)	<u>ADDRESS)</u>	Ruskin, F	L 33573	3	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>DX)</u>	9767 Mull	5217 Mars	<u> </u>	TI
B. If amending the registered agent and/or reg agent and/or the new registered office address l	istered office a here:	address on our reco	ords, <u>enter the na</u> i	PH DE TATE	regist
Name of New Registered Agent:	Rictari	a Jean	- Baplist	ie	
New Registered Office Address:	2767	Mulbery C	Marsh Lax street address	\C	
	Rusk		, Florida _	3357 <u>3</u> Zip Code	
		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 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

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Act
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ffective date, if other than the date of filing: 7/25/2022 (optional) an effective date 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 diet. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be liste occurrent's effective date on the Department of State's records. record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after its filed. Augustus James J		
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