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(Re	questor's Name)	
(Address)		
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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22 MAY -9 PM ILLS

COVER LETTER

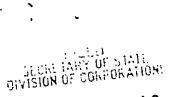
TO:

Registration Section Division of Corporations

ORLK LOT					
SUBJECT:	Name of Limited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:			
	Ismel Chavez				
		Name of Person			
		Firm/Company			
	531 E 36TH STRET	Address			
	HIALEAH, FL 33013				
	hernandez.yanet@gmail.cor				
		to be used for future annual report noti	fication)		
For further information e Ismel Chavez	oncerning this matter, please c	305 370 - 2149			
Name o	f Person	at () Area Code Daytim	e Telephone Number		
Enclosed is a check for t	he following amount:				
□ \$25,00 Filing Fee	∑(\$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed)	☐ \$60,00 Filing Fee. Certificate of Status & Certified Copy cadditional copy is enclosed)		
Mailing Address Registration S Division of C P.O. Box 632	Section Corporations 27	Street Address: Registration Se Division of Co The Centre of T	rporations Fallahassee		
Tallahassee, i	F4. 32314	Z415 M. Monto	e Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



ORLK LOT 325, LLC

22 MAY -9 PH 1: 43

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

1.27(8)(1.18.17.3	d assigned
Florida document number 1.22000148173	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
N/A The new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation	on "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our records, enter the name of the agent and/or the new registered office address here:	e new registered
Name of New Registered Agent: N/A	
Name of New Registered Agent: New Registered Office Address: Enter Florida street address	
New Registered Office Address: Enter Florida street address	
New Registered Office Address: Enter Florida street address City Zip C	
New Registered Office Address: 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>	<u>Name</u>	Address	Type of Action
AMBR	YANET HERNANDEZ	531 E 36TH STREET, HIALEAH, FL 33013	ErAdd
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			□Change
			= Add
			□Remove
			□Change
			□Add
		□Remove	
			□Change
			□Add
			Remove
			□Change

	10.1
Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or magnetic magnetic magnetis and cannot be prior to date of filing or magnetic magnetis and cannot be prior to date of filing or magnetic magn	(optional) ore than 90 days after tiling.) Pursuant to 605.0207 (3) g requirements, this date will not be listed as the
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. cord is filed.	on the earlier of: (b) The 90th day after the
Dated	
Jani-	
Signature of a member or authorized representative	of a member
Ismel Chavez	