22000149476

(Requestor's Name)
(Address)
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(Document Number)
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22 MAY 20 PH 12: 54

T. MATTHEWS JUL 21 2022

Div	ision of Cor	porations				
SUDJECT.	3408 SPRIN	NG STREET LLC				
SUBJECT:		Name of Lim	ited Liability Company			
The enclosed	d Articles of a	Amendment and fec(s) are sub	emitted for filing.			
Please return	all correspo	ndence concerning this matter	to the following:			
		BELINDA KESSEL				
			Name of Person			
			Firm/Company			
		800 DESOTO RD				
	Address					
	BOCA RATON FL 33432					
	City/State and Zip Code					
	FL.COM					
		E-mail address: (to be used for future annual report notification)			
For further in	nformation co	oncerning this matter, please c	all:			
BELINDA I	KESSEL		954 270-0614 at ()			
	Name of	Person	Area Code Daytime Telephone Nu	imber		
Enclosed is a	check for th	c following amount:				
□ \$25.00 E	Filing Fec	■ \$30.00 Filing Fee & Certificate of Status	Certified Copy Cert (additional copy is enclosed) Cert	00 Filing Fec, tificate of Status & tified Copy titional copy is enclosed)		
	iling Address gistration S		Street Address: Pagistration Section			
		orporations	Registration Section Division of Corporations	• •		
P.C	D. Box 632	7	The Centre of Tallahassee			
Tal	lahassee, F	L 32314	2415 N. Monroe Street, Sui	te 810		

Tallahassee, FL 32303

ARTICLES OF ORGANIZATION OF

CREATE STATE OF STATE OF CORPORATION

3408 SPRING STREET LLC

22 MAY 20 PM 12: 54

(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 Comp Florida document number L22000149476	pany were filed on MARCH 2	8 2022 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u>s)</u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	fice address on our records,	enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street	t 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.

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	PETER KESSEL	800 DE SOTO RD BOCA RATON FL 33432	≣ Add
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vote:	we date, if other than the date of filing: (optional) ective 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 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ent's effective date on the Department of State's records.
recor d is fi	d 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 ed.
Dated	MAY 19 2022
	Blenda sul Signature of a member or authorized representative of a member
	ı
	BELINDA KESSEL