L23200149581

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MA	ЧL
(Business Entity Name)	
(Document Number)	
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of 1410/2022

Incorporating Services, Ltd.

1540 Glenway Drive Taliahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

incserv

ORDER FORM

Florida Department of State The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303 corphelp@dos.myflorida.com

FROM

Melissa Moreau mmoreau@incserv.com 850.656.7953

REQUEST DATE 6/3/2022

850-245-6051

PRIORITY Regular Approval

OUR REF_#_(Order_ID#)] 1043284

ORDER ENTITY___ 130 10TH AVE N LLC

PLEASE	PERFORM	THE FOLI	LOWING	SERVICES:

130 10TH AVE N LLC (FL)

File the attached amendment

NOTES:

\$25.00 Authorized

Email address for annual report reminders: shelems@sundocfilings.com

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Friday, June 3, 2022 Page 1 of 1

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2022 JUH - 3 AM 8: 40

130 10th AVE N ILLC		. : =
(Name of the Limited Lia	ability Company as it now appears on our reco orida Limited Liability Company)	rds.)SU.
(ATK	man immed maining company	ALL SCALETT
The Articles of Organization for this Limited Liabilit	y Company were filed on 04/08/2022	and assigned
Florida document number L22000149581	· · · ·	
This amendment is submitted to amend the following	3.	
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 "LI	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	ODRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
Training dual tas MAT BEAT OUT OF THEE BOX		
B. If amending the registered agent and/or registe	ered office address on our records, ente	er the name of the new register
agent and/or the new registered office address her	<u></u>	
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Florida street addr	ess
		Zlanida
	City	FloridaZip Code
New Registered Agent's Signature, if changing Regist	ered Agent:	
I hereby accept the appointment as registered ago	nt and among to got in this committee I	finethine money to comment with a
provisions of all statutes relative to the proper an	d complete performance of my duties, i	urmer agree to compty wan it. and I am familiar with and
accept the obligations of my position as registered	d agent as provided for in Chapter 605	, F.S. Or, if this document is
being filed to merely reflect a change in the regist company has been notified in writing of this chan	tered office address, I hereby confirm t	hat the limited liability
company nas oven noujiea in writing oj inis chan	ge.	

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>	<u>Address</u>	Type of Action
MGR	KRISTOFF REAL ESTATE INVESTMENTS LLC	2853 S SOSSAMAN RD	
		STE A-101	Remove
		MESA, AZ 85212	
MGR	DACOSTA REAL ESTATE INVESTMENTS LLC	2853 S SOSSAMAN RD	□Add
		STE A-101	■ Remove
		MESA, AZ 85212	□Change
MGR	TIP OF THE SPEAR FUND MANAGERS LLC	2853 S SOSSAMAN RD	■Add
		STE A-101	□Remove
		MESA, AZ 85212	Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change

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Tective date, if other than the d an effective date is listed, the date must bote: If the date inserted in this bloc	e specific and canno	t be prior to date	of filing or more the	(optional in 90 days after filing prements, this date	t.) Pursuant to 605.0207
ocument's effective date on the Dep	artment of State's	records.			
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is filed.	aate, but not an en	ective time, at	12.01 a.m. on the	earner or. (b)	ne 90th day after the
JUNE 3	202	2			
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Filing Fee: \$25.00