L22000179760

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
J. HORNE	
JUN 2 2 2022	
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Office Use Only



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2022 JUN 21 AH II: 32 SECRETARY OF STANDARD AND STANDARD

RECEIVED

•	FLORIDA CAPITAL COURIE 2330 CLARE DRIVE	ER SERVICES, INC	
	TALLAHASSEE, FL 32309		.
	(850) 524-5437		
	(850) 524-624		
	PLEASE USE FUND FROM T	THE ACCOUNT; 1202100	00160 AMOUNT: 25.00
	Authorization Signature:	Jeurs Fill	
	MAEVAN DEVELOPMENTS	() S. LLC	0
	BUSINESS		DOCUMENT #
	Walk in		Pick up time
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	Mail out		Will wait
	Photocopy		
	Certified Copy of Article	es of Incorporation	Certificate of Domestication
	Certificate of Status		
	<u>NEW FILINGS</u>		<u>AMMENDMENTS</u>
	Profit		XAmendment
	Not for Profit		Resignation of R.A. Officer/Director
	Limited Liability		Change of Registered Agent
	Domestication		Dissolution/Withdrawal
	Other		Merger
	CORP		Conversion
	OTHER FILINGS	REG	SISTERATION/QUALIFICATIONS
	Annual Report	Fe	oreign filing
	•		Limited Partnership
	Fictitious Name	1	Reinstatement
	APOSTILLE ()	Other	
	intry		
EVAR	MINER'S INITIALS:		
LAAN	HINER S INITIALS:	_	

FLORIDA CAPITAL COURIER SERVICES, INC 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-624

MAEVAN DEVELOPMENTS, LLC BUSINESS	DOCUMENT #
Walk in	Pick up time
Mail out	Will wait
Photocopy	
Certified Copy of Articles of Incom	rporation Certificate of Domestication
Certificate of Status	
<u>NEW FILINGS</u>	<u>AMMENDMENTS</u>
Profit	X Amendment
Not for Profit	Resignation of R.A. Officer/Direction Change of Registered Agent
Limited Liability Domestication	Dissolution/Withdrawal
Other	Merger
CORP	Conversion
OTHER FILINGS	REGISTERATION/QUALIFICATIONS
Annual Report	Foreign filing Limited Partnership
Fictitious Name	Reinstatement
	Other

COVER LETTER

Registration Section Division of Corporations

TO:

	DEVELOPMENTS, LLC		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of a	Amendment and fee(s) are sub	nitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Jeffrey Boyarnick, Esq.		
		Name of Person	
	Bovarnick Law		
		Firm'Company	
	150 E. Palmetto Park Road	. Suite 340	
		Address	
	Boca Raton, FL 33432		
		City/State and Zip Code	
	jb@bovarnicklawgroup.con		
	E-mail address; (to be used for future annual report noti	lication)
For further information c	oncerning this matter, please co	all:	
Jeffrey Boyarnick, Esq.		561 465-9969 at () Area Code Daytim	
Name o	f Person	Area Code Daytim	ie Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60,00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addres</u> Registration		<u>Street Address:</u> Registration Sc	ection
Division of C		Division of Co	rporations
P.O. Box 630		The Centre of	
Tallahassee,	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



MAEVAN DEVELOPMENTS, 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 April 14.	2022 and assigned
Florida document number 1.22000179760		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designal	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2260 Ringling Blvd. #	
(Principal office address MUST BE A STREET ADDRESS)	Sarasota, Fl. 34237	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BON)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our record	s, enter the name of the new registered
New Registered Office Address:	Enter Florida str	wet address
		, Florida
		Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>	
I hereby accept the appointment as registered agent and age provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of my d provided for in Chapt	luties, and I am familiar with and ver 605, F.S. Or, if this document is
If Cha	inging Registered Agent, S	ignature 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
			□Add
			□Remove
			☐ Change
			□Remove
			□ Change
	***		□ Add
			□Remove
			□ Change
			□Remove
			☐ ☐ Change
			□Add
			TIRemove
			⊒Add
			□Remove
			∐Change

ffective date, if other than the date of filing: (optional) In effective date is based, the date must be specific and cannot be prior to date of filing or more than 90 days after filing. Pursuant to on 5/2/27 And offertive date is based, the date must be specific and cannot be prior to date of filing or more than 90 days after filing. Pursuant to on 5/2/27 Accords specific a delayed effective date, but not an effective time, at 12/01 a.m. on the earlier of: (b) The 90th day after the distribution of the filed. Signature of a member or authorized representation of a member of a member of authorized representation. June 17 2022 Signature of a member or authorized representation of a member of a memb								
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Filing Fee: \$25.00