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## **COVER LETTER**

#### TO: Registration Section Division of Corporations

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SUBJECT: 2860 Sw LLC. Name of Limited Liability Company

The enclosed Articles of Amendment and feets) are submitted for filing.

Please return all correspondence concerning this matter to the following:

For further information concerning this matter, please call:

Enclosed is a check for the following amount:

Certificate of Status

\$55.00 Filing Fee & Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address:</u> Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2860 SW LLC	
(Name of the Limited Liability Company (A Florida Limited Lia	r as it now appears on our records.) bility Company)
The Articles of Organization for this Limited Liability Company w Florida document number $\_L22000184373$ .	ere filed on $4/11/22$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liabili</u>	ty company here:
2850 SW, $LLCThe new name must be distinguishable and contain the words "Limited Liability$	Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	6433 NW 53 STREET
(Principal office address MUST BE A STREET ADDRESS)	LAUDURHII, FL 33319
Enter new mailing address, if applicable: <u>(Mailing address MAY BE A POST OFFICE BOX)</u>	
B. If amending the registered agent and/or registered office ad agent and/or the new registered office address here: <u>Name of New Registered Agent</u> :	dress on our records. <u>enter the name of the new registered</u>
New Registered Office Address:	Enter Florida street address

\_ Florida \_

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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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.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added or removed from our records:

### MGR = Manager AMBR = Authorized Member

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<u>Title</u>	Name	Address	<b>Type of Action</b>
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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E. Effective date, if other than the date of filing: \_\_\_\_\_\_(optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after tiling.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the 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 the record is filed.

Dated	MAY 12 2022.
	1 ll the
	Signature of a member or authorized representative of a member
	STURAT HOWITT AccountAnt
	Typed or printed name of signee

Filing Fee: \$25.00