L22000198193

(Request	tor's Name)
(Address	5)
(Address	;)
(100.000	,
(City/Stat	te/Zip/Phone #)
PICK-UP	WAIT MAIL
(Busines	s Entity Name)
(Busines	o Emily Name,
(Docume	ent Number)
Certified Copies	Certificates of Status
Special Instructions to Filing	Officer
operation and actions to 1 ming	- Cilider.
	41.
	5/8/22

Office Use Only



500388558595

06/07/22--01008--018 **25.00

2022 JUN -7 AM 6: 15

COVER LETTER

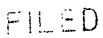
TO:

Registration Section Division of Corporations

SUBJECT:	104 PARK	WOOD, LLC:	, .		
Monarett		ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Leon A. Brunet				
		Name of Person			
	1850	Firm/Company	<u> </u>		
	648 Palermo Avenue				
		Address			
	Coral Gables, FL 33134				
		City/State and Zip Code			
	lbrunet@brunetlaw.com				
	E-mail address: (to be used for future annual report no	tification)		
For further information c	oncerning this matter, please c	all:			
Leon A. Brunet		305 796-0375 at ()			
Name o	f Person		ne Telephone Number		
Enclosed is a check for the	he following amount:				
■ \$25.00 Filing Fcc	☐ \$30.00 Filing Fee & 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)		
Mailing Addres		Street Address:	action		
Registration Section Division of Corporations		Registration Section Division of Corporations			
P.O. Box 632	27	The Centre of	The Centre of Tallahassee		
Tallahassee,	FL 32314	2415 N. Monro	2415 N. Monroe Street, Suite \$10		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



104 PAR	KWOOD, LLC	2022 JUN -7 AM 8: 19		
(<u>Name of the Limited Liabil</u> (A Florid	ty Company as it now appears on a Limited Liability Company)	- TAI1 表現表の第二人の CMID		
The Articles of Organization for this Limited Liability C	Company were filed on	26 2022 and assigned		
Florida document number <u>L ZZ 0001 981</u>	<u>9</u> .3	,		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lim	ited liability company here:			
The new name must be distinguishable and contain the words "Lin	ited Liability Company," the designa	ation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	648 Palermo Avenue	648 Palermo Avenue		
(Principal office address MUST BE A STREET ADDI	Coral Gables. Florida	33134		
Enter new mailing address, if applicable:	648 Palermo Avenue	648 Palermo Avenue		
(Mailing address MAY BE A POST OFFICE BOX)	Coral Gables, Florida	33134		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	d office address on our record	ds, enter the name of the new registere		
Name of New Registered Agent: Leon A. Brunet, P.A.				
New Registered Office Address: 2151 S. Le Jeune Rd. Suite 301				
	Enter Florida st	reet address		
Coral	Gables	, Florida 33134		
	City	Zip Code		
New Registered Agent's Signature, if changing Registere	d 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.

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
MGR	Leon A. Brunet	648 Palermo Avenue	
		Coral Gables, Florida 33134	□Remove
			
			□Add
			□ Remove
			□Change
		□Remove	
		□Add	
		□Remove	
		☐ Change	
		□Add	
	 	Remove	
		☐ Change	
			□Remove
			□Change

				
	 			
				-
		+11-16-1-1		
				
				· · · · · ·
-				
				_
				
	June 1	2022		
Effective date, if other that (If an effective date is listed, the d	n the date of filing:		(optiona	il)
Note: If the date inserted in	this block does not meet the a the Department of State's rec	ipplicable statutory fi		
the record specifies a delayed e cord is filed.	fective date, but not an effect	tive time, at 12:01 a.r	n. on the earlier of: (b)	The 90th day after the
Dated	2022			
Dated		-		

Typed or printed name of signee

#1.1W 1