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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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A. BUTLER OCT 1 4 2022

COVER LETTER

TO: Registration Se Division of Con			
SW 10 C"C	OURT LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Esther Shuchat		
		Name of Person	
	SW 10 COURT LLC		
		Firm/Company	
	1617 Jefferson Street		
		Address	
	Hollywood, FL 33020		
		City/State and Zip Code	
	david@teltik.com	to be used for future annual report notif	fication)
For further information of	concerning this matter, please c		
David Goodman		732 399-0021	
Name o	of Person	Area Code Daytime	e Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$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 Addre		Street Address:	···
Registration Division of C		Registration Sec Division of Cor	
P.O. Box 633		The Centre of T	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, Fl. 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION FILED

SW 10 COURT LLC 2022 JUL 22 PH 2: 10

The Articles of Organization for this Limited Liability Company were filed on $\underline{\frac{\text{May 4.2022}}{\text{May 1000}}}$ and assigned Florida document number 1,22000214378 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 "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

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	David Harel	1617 Jefferson Street	□Add
		Hollywood, Fl. 33020	■Remove
			□ Change
MGR	Shlomo Ginsburg	1617 Jefferson Street	= Add
		Hollywood, FL 33020	□Remove
			Change
			□Add
			□Remove
		□Change	
			□Add
			□Remove
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			□Change

J. J. S.

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fan effecti <mark>Sote:</mark> If i	edate, if other that ive date is listed, the da the date inserted in t's effective date on	ne must be specific ar his block does not	nd cannot be prior to meet the applical	o date of filing or me ble statutory filing	ore than 90 days after	ional) er filing.) Pursuant to is date will not be	605 0207 listed as
e recor The 90	rd specifies a de Oth day after th	layed effective e record is filed	date, but not l.	an effective t	ime, at 12:01	a.m. on the ea	rlier of
ated	July 19	2022 Esthe	. Shue	hat			
		Signature of	nember or author	ized representative	of a member		
	Esther Shuchat						

Filing Fee: \$25.00