

L22000227189

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



PICK-UP



WAIT



MAIL

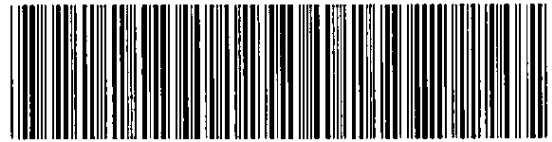
(Business Entity Name)

(Document Number)

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2023 NOV 30 PM 3:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

2023 NOV 30 AM 11:08

NOTE

A. BUTLER

DEC - 1 2023

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** WELAUNEE APT JV LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kristin Matthews

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

1309 Thomasville Road Suite 206

\_\_\_\_\_  
Address

Tallahassee, FL 32303

\_\_\_\_\_  
City/State and Zip Code

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kristin Matthews

850 597-3900  
at ( )

\_\_\_\_\_  
Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

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**

WE LAUNEE APT JV LLC

(Name of the Limited Liability Company as it now appears on our records)  
(A Florida Limited Liability Company)

**FILED**

2023 NOV 30 Art 11:08

The Articles of Organization for this Limited Liability Company were filed on 05/16/2022 and assigned  
Florida document number 122000227189.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

PRIME TALLAHASSEE VENTURE LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

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*

Florida

*City*

*Zip Code*

**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>	<u>Address</u>	<u>Type of Action</u>
MGR	JUSTIN GHAZVINI	4708 CAPITAL CIRCLE NW	<input type="checkbox"/> Add
		TALLAHASSEE, FL 32303	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	BEHZAD GHAZVINI	4708 CAPITAL CIRCLE NW	<input type="checkbox"/> Add
		TALLAHASSEE, FL 32303	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MEHRAN GHAZVINI	4708 CAPITAL CIRCLE NW	<input type="checkbox"/> Add
		TALLAHASSEE, FL 32303	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	JASON GHAZVINI	4708 CAPITAL CIRCLE NW	<input type="checkbox"/> Add
		TALLAHASSEE, FL 32303	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	GHAZVINI JV HOLDINGS LLC	4708 CAPITAL CIRCLE NW	<input checked="" type="checkbox"/> Add
		TALLAHASSEE, FL 32303	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

[illegible]

11/30/23

**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.

Dated NOVEMBER 30, 2023

of a member or authorized repr

Typed or printed name of signee