

L 22 000 231 722

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

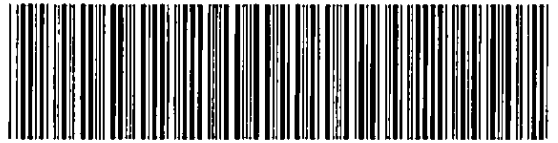
(Business Entity Name)

(Document Number)

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08/10/23--01009--002 \*\*25.00

2023 AUG 10 AM 8:13  
FILED

8/26/2023

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Apogee Tree, 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:

Jodie Whitzel  
Name of Person

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

1000 Brickell Ave Ste 715  
Address

Miami FL 33131  
City/State and Zip Code

info@apogee-tree.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jodie Whitzel at (305) 473-8522  
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

Apogee Tree, LLC

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

2023 AUG 10 AM 8:13

The Articles of Organization for this Limited Liability Company were filed on 5/18/2022 and assigned Florida document number 172000231722.

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)**

1000 Brickell Ave

Ste 715

Miami FL 33131

Enter new mailing address, if applicable:

**(Mailing address MAY BE A POST OFFICE BOX)**

1000 Brickell Ave

Ste 715

Miami FL 33131

**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:

Jodie Whitzel

New Registered Office Address:

1000 Brickell Ave Ste 715

*Enter Florida street address*

Miami

*City*

Florida

33131

*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.*

Jodie Whitzel  
**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>
<u>P</u>	<u>Luis Guerrero</u>	<u>66 W Flagler St</u>	<input type="checkbox"/> Add
		<u>Ste 900</u>	<input checked="" type="checkbox"/> Remove
		<u>Miami FL 33130</u>	<input type="checkbox"/> Change
<u>P</u>	<u>Jodie Whitzel</u>	<u>1000 Brickell Ave</u>	<input checked="" type="checkbox"/> Add
		<u>Ste 715</u>	<input type="checkbox"/> Remove
		<u>Miami FL 33131</u>	<input type="checkbox"/> Change
<u>_____</u>	<u>_____</u>	<u>_____</u>	<input type="checkbox"/> Add
<u>_____</u>	<u>_____</u>	<u>_____</u>	<input type="checkbox"/> Remove
<u>_____</u>	<u>_____</u>	<u>_____</u>	<input type="checkbox"/> Change
<u>_____</u>	<u>_____</u>	<u>_____</u>	<input type="checkbox"/> Add
<u>_____</u>	<u>_____</u>	<u>_____</u>	<input type="checkbox"/> Remove
<u>_____</u>	<u>_____</u>	<u>_____</u>	<input type="checkbox"/> Change
<u>_____</u>	<u>_____</u>	<u>_____</u>	<input type="checkbox"/> Add
<u>_____</u>	<u>_____</u>	<u>_____</u>	<input type="checkbox"/> Remove
<u>_____</u>	<u>_____</u>	<u>_____</u>	<input type="checkbox"/> Change

