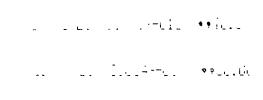
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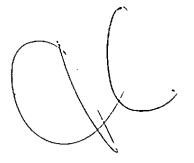
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INC	236 East 6th Avenue. Tallahassee, Florida 32303	
	P.O. Boy 37066 (39315-7066) (850) 999-9666 or (800) 969-1666 Fay (850) 999-1666	_

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1.	1411 S ATLANTIC AVE LLC (CORPORATE NAME AND DOCUME)		
2.	(CORPORATE NAME AND DOCUME)	("1" 4)	
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4.	(CORPORATE NAME AND DOCUME)	NT #)	7 (57 A) 2023 APR 18
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SPECIAL	INSTRUCTIONS:	Maria.	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1411 S ATLANTIC AVEILLC

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

(A Florida Lumied)	главицу Сотрапу)	
The Articles of Organization for this Limited Liability Company	were filed on 05/31/20	22 and assigned
Florida document number 1.22000236246		
This amendment is submitted to amend the following:		70.
A. If amending name, enter the new name of the limited liab	ility company here:	•
		<u></u>
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designa	ion "LLC" or the abbreviation "EffC."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		<u>ප</u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	address on our record	s, enter the name of the new registered
New Registered Office Address:		
rew Registered Office Address.	Enter Florida str	eet address
		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	•	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my d provided for in Chapt	uties, and I am familiar with and er 605, F.S. Or, if this document is

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
AMBR	MILLER, JOSEPH	1 NORTH JOHNSTON AVENUE	<u> </u>
		HAMILTON, NJ 08609	□Remove
			□Change
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:: If the date inserted in this blo ment's effective date on the De		quirements, this date will not be listed
ord specifies a delayed effective filed.	date, but not an effective time, at 12:01 a.m. on the	ne earlier of: (b) The 90th day after t
APRIL 17TH	2023	
	/S/ELLIOTT TEITELBAUM	
	Signature of a member or authorized representative of a	

•