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COVER LETTER

TO: Registration Section Division of Corporations

Blackack Proparty Howings SUBJECT:

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

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Please return all correspondence concerning this matter to the following:



For further information concerning this matter, please call:



Enclosed is a check for the following amount:

\$\$\$25.00 Filing Fee

S30.00 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)

<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address:</u> Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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ARTICLES OF	AMENDMENT	
ARTICLES OF (ORGANIZATION FILED	
BINALACEC PROPERTY : (Name of the Limited Liability Compa (A Honda Limited	2022 JUN 13 AM 9: 2 tording by State Strates S	20 Ec
The Articles of Organization for this Limited Liability Company Florida document number $_L 22000253968$	were filed on $\underline{D6} / 02 / 22^{\bullet}$ and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
NTA The new name must be distinguishable and contain the words "Limited Light	htty Company," the designation "11.0" or the abbreviation "1.1.0"	
Enter new principal offices address, if applicable:	<u>N/A</u>	
(Principal office address MUST BE A STREET ADDRESS)	4	_
		—
Enter new mailing address, if applicable:	NIA	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a <u>agent and/or the new registered office address here</u> :	address on our records, <u>enter the name of the new regi</u> s	<u>stered</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Euter Florida street address	
· ·	, Florida	
New Registered Agent's Signature, if changing Registered Agent:	a a a a a a a a a a a a a a a a a a a	

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. Thereby confirm that the limited liability company has been notified in writing of this change.

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

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<u>Title</u>	Name	Address	Type of Action
<u>M</u>	Carros O. Friger	10467 NW 66m Sheet	XAdd
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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ective date, if other than the date of filing:	(optional)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated	June 9 2022
	Signature of a member or authorized representative of a member
	Lovena Friger Typed or printed name of signee