L22000261777

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H23000355266 3)))

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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : DORIS ACCOUNTING & TAX SERVICE CORP
Account Number : I20190000104
Phone : (305)323-4551
Fax Number : (305)397-1425

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: ____________________

2023 OCT 11 PM 9:41

2023 OCT 11 AM 10:34

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION

MIDTOWN 2022 LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	$52.50

S. ROBERTS

OCT 12 2023

Electronic Filing Menu Corporate Filing Menu Help

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MIDTOWN 2022 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:

DORIS POLANCO
Name of Person

Firm/Company

1 7700 N BAY RD UNIT 903 [illegible]
Address

SUNNY ISLES BEACH, FL 33160
City, State and Zip Code

DORISFAXES@OUTLOOK.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DORIS POLANCO at ([illegible]) [illegible]
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

WHITTOWN 2022 LLC

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

The Articles of Organization for this Limited Liability Company were filed on _____, and assigned

Florida document number L22000261777

This amendment is submitted to amend the following:

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

(Note: 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)

2023 OCT 11 PM 9:41

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:

(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 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

Title	Name	Address	Type of Action
MGR	Lissette C Bravo Anato	6630 NW 105 PL	Add
		DORAL FL 33178	Remove
			Change
			Add
			Remove
			Change
			Add
			Remove
			Change
			Add
			Remove
			Change
			Add
			Remove
			Change
			Add
			Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: ______________________ **(optional)**
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

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 OCTOBER 10, 2023

Signature of a member or authorized representative of a member

Manuel J Perez Rivero
Typed or printed name of signee

Filing Fee: $25.00