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(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
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(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to Filing Officer.

Office Use Only



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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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			Courier	

COVER LETTER

TO:

Registration Section

Division of Co	prporations		
CIID IN CO	ealty One LLC		
SUBJECT:	Name of Lir	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sul	bmitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Mordechay Maximoff		
		Name of Person	
		Firm/Company	
	14473 Draft Horse Lane		
		Address	
	Wellington FL 33414		
		City/State and Zip Code	
	moti@aragondevelopment.		
For further information of	concerning this matter, please c	to be used for future annual report noti	fication)
Mordechay Maximoff		561 516-2560	
Name o	of Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check for t	he 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 of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monroe Tallahassee, FL	porations allahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Aragon Realty One, LLC		2023 JAN 25 AM 9: 20
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) 000-
		- 7.67 1 100 UE STATE
The Articles of Organization for this Limited Liability Company	were filed on June 17th, 2022	SECRETARY OF STATE TALL APASSES, FL and assigned
Florida document number L22000279257		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity 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)		
3. If amending the registered agent and/or registered office a gent and/or the new registered office address here:	ddress on our records, enter th	e name of the new register
Ben and or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flori	da
	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>	Address	Type of Action
MGR	Sandy Nadler	14473 Draft Horse Lane	
		Wellington, FL 33414	
			□Change
MGR	Mordechay Maximoff	14473 Draft Horse Lane	≣ Add
		Wellington, FL 33414	□Remove
			□Change
			□Add
			□Remove
			Change
		.	□Add
			□Remove
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Tective date, if other than the effective date is listed, the date interest in this becament's effective date on the I	ist be specific and cannot be prior to date of filing of lock does not meet the applicable statutory f	(optional) or more than 90 days after filing.) Pursuant to 605.020 liling requirements, this date will not be listed as
record specifies a delaye he 90th day after the rec	d effective date, but not an effective cord is filed.	re time, at 12:01 a.m. on the earlier o
ed	, 2022	
	S/ MORDECHAY MAXI Signature of a incinber or authorized representa	0 1DFE
	Signature of a incinber or authorized representa	tive of a member

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