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COVER LETTER

TO:

Registration Section Division of Corporations

PLUMSTEAD COMMONILLC SUBJECT: _____ 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: MINESH PATEL. Name of Person Firm/Company 815 DELANEY PARK DRIVE Address ORLANDO, FL 3286 City/State and Zip Code christine@patminco.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: CHRISTINE CHONG Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ☐ \$60.00 Filing Fee. □ \$55.00 Filing Fee & ☐ \$30.00 Filing Fee & **■** \$25.00 Filing Fee Certificate of Status & Certified Copy Certificate of Status Certified Copy (additional copy is enclosed) (additional copy is enclosed) Street Address: Mailing Address: Registration Section Registration Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2022 OCT 17 AM 8: 18

PLUMSTEAD COMMONILLC

(Name of the Limi	ted Liability Compa (A Florida Limited I	iny as it now appears on ou Liability Company)	TALLAHASSEE, FL
The Articles of Organization for this Limited L Florida document number 1.22000284649	iability Company	were filed on $\frac{06/23/202}{2}$	22 and assigned
This amendment is submitted to amend the following	owing:	•	
A. If amending name, enter the new name of	f the limited liab	oility company here:	
The new name must be distinguishable and contain the	vords "Limited Liabi	lity Company," the designat	ion "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		815 DELANEY PARE	CDRIVE
		ORLANDO, FL 32806	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		815 DELANEY PARE ORLANDO, FL 32800	
B. If amending the registered agent and/or agent and/or the new registered office addre		address on our record	s, enter the name of the new registered
Name of New Registered Agent:	MINESH PAT	EL.	<u></u>
New Registered Office Address:	815 DELANE	Y PARK DRIVE	
	-	Enter Florida str	vet address
	ORLANDO		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 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	MINESH PATEL	815 DELANEY PARK DRIVE	≣ ∧dd
		ORLANDO, FL 32806	□Remove
			□Change
MGR CHRISTINE CHONG	CHRISTINE CHONG	7224 BACKWOODS TRAIL	≅ Add
		WINDERMERE, FL 34786	
			Change
MGR	ANTHONY C NGO	941 W. MORSE BLVD, STE. 100	
		WINTER PARK, FL 32789	Remove
			□Change
	<u> </u>		□Add
			□Remove
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f an effec Note: - li	e date, if other than the date of filing:
record d is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after th d.
Dated _	october 10 2022
	Signature of a member of authorized representative of a member
	MINESH PATEL