## 122000313541

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	

Office Use Only





400392606134

08/13/22-+01015--021 \*\*25.00

22 AUG 19 PM 1: 52

# COVER LETTER

то:	Registration Section Division of Corporations	i .		<b>7</b> 0.00	
SUBJE	ect: Justin	Edward Name of Limite	Investments d Liability Company	LLC	
The en	iclosed Articles of Amendm	ent and fee(s) are subm	itted for filing.		
Please	return all correspondence c	oncerning this matter to	the following:		
		Justin	Rucda Name of Person		2 2
					rvision of c 22 AUG 19
			Firm/Company	il.	6 - Si
		18520	NW 67th ave	# 225	9 6
			Address		AND THE PROPERTY OF STREET
		J rue	FL 33015 City/State and Zip Code da 6 9 yahoo. o be used for future annual report noti	Com fication)	<u> </u>
For fi	arther information concerni				
	<b>-</b> 1 3	da	at (786) 499 Area Code Daytin	2831 ne Telephone Number	
Enclo	osed is a check for the follo	wing amount:			
4		30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Certificate o Certified Co (additional copy	f Status & py
	Mailing Address:	n	Street Address: Registration S	ection	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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

Justin Edward						
(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 July 19, 2022 and assigned Florida document number <u>L22000 313 541</u>

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liab	oility company here:		
STMCHA	L.L.C		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the abbrevia	ion "L.L.	C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	18520 NW 67th + Hialeah, Fl 3301	tve 5	<u>#</u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	18520 NW 67th A. Huleah, FL 3367.	re 7	 #
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of t	the new 22 AUG	registered
Name of New Registered Agent:		9	<del>`</del>
New Registered Office Address:	Enter Florida street address	- <del>P</del>	9.21 9.21 9.2
	, Florida	- 5 <u>8</u>	
<del></del>	City	ip Code	<b></b>

### 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:

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Remove
			Change
			□Add
			□Remove
			DE AUGA 9 PERIONER
			P. C.
			び Deftangeを
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			Change
			□Add
			□Remove
			□Change

#### Page 2 of 3

. . . .

. . . . .

<del></del>						
			<del> </del>		2:	VIC
		<u></u>			AUG	NOIS
						0; C
					70	- FE
						- <del>-</del> <del>-</del> - <del>-</del> <del>-</del> - <del>-</del> <del>-</del> - <del>-</del> <del>-</del> - <del>-</del>
					<u> </u>	- <del>र</del> ू
<u> </u>		<u> </u>				_
			<del> </del>			_
	<u> </u>			<u> </u>		=
Note: If the date inser	er than the date of and the date must be specified in this block does date on the Departmen	not meet the applic	able statutory min	ore than 90 days after f g requirements, this	nal) iling.) Pursuant to 60 date will not be lis	)5.020 sted a
The 90th day aff	s a delayed effect ter the record is f	ilea.	ot an effective t	ime, at 12:01 a	.m. on the earl	lier
Dated Ang	iust 3rd					

Page 3 of 3

Filing Fee: \$25.00