## L22000350464

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Only older 21ph Hone h)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
GOTTING GODING
Special Instructions to Filing Officer:





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04/24/23--01018--011 \*\*25.00

## **COVER LETTER**

Registration Section

Tallahassee, FL 32314

TO:

Division of Cor			
Fitzwater S SUBJECT:			<del> </del>
	Name of Lim	ited Liability Company	
The anglosed Articles of	Amendment and fee(s) are sub	mitted for filing	
Please return all correspo	ondence concerning this matter	to the following:	
	Sofia Vasquez		
		Name of Person	
	ZenBusiness INC		
		Firm/Company	
	336 E. College Ave Suite .	301	
		Address	•
	Tallahassee, FL 32301		
		City/State and Zip Code	
	fulfillment@zenbusiness.co		
	E-mail address: (	to be used for future annual report noti	fication)
For further information c	oncerning this matter, please ca	all:	
c/o ZenBusiness INC		at () 493-6249 Area Code Daytim	
Name o	l'Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	he following amount:		
		☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		<u>Street Address:</u>	
Registration S		Registration Sec	
Division of C P.O. Box 632		Division of Cor The Centre of T	

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Fitzwater St LLC		
(Name of the Limit	ed Liability Company as it now appears on our records. (A Florida Limited Liability Company)	)
	ability Company were filed on 08/09/2022	and assigned
orida document number 1,22000350464		
nis amendment is submitted to amend the follo		
. If amending name, enter the new name of	the limited liability company here:	
ne new name must be distinguishable and contain the w	ords "Limited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
nter new principal offices address, if applica	able:	
Principal office address MUST BE A STREE	TADDRESS)	<u>-</u>
nter new mailing address, if applicable:		<del></del>
Mailing address MAY BE A POST OFFICE I	<u></u>	
	egistered office address on our records, <u>enter t</u>	he name of the new regist
gent and/or the new registered office addres	s here:	
Name of New Registered Agent:	·	
New Registered Office Address:		
<del>-</del>	Enter Florida street address	
	Flor	rida
	City	Zin Corle

## 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>	<u>Address</u>	
AMBR	Lorena Cortes	215 SE 8th Ave Apt 980	<b>=</b> Add
		Fort Lauderdale, FL 33301	
			□Change
			□Add
			□Remove
			□Change
			∐Add
			□Remove
			□Change
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fective date, if other than t	the date of filing			(antion	val)	
n effective date is listed, the date stee: If the date inserted in this cument's effective date on the	must be specific and on block does not me	cannot be prior to eet the applicab	date of filing or more ole statutory filing	(option re than 90 days after fi requirements, this o	ling.) Pursuant to 605.0	)207 1 as
ecord specifies a delayed effectis filed.	tive date, but not a	an effective tim	e, at 12:01 a.m. or	the earlier of: (b)	The 90th day after t	the
ted	,	2023	<u>.</u> ·			
/ / m = E	. 1					
/s/ Terry E	ggieston					
/s/ Terry E	Signature of a m	ember or authori	zed representative of	f a member		

Filing Fee: \$25.00