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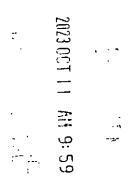
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## **COVER LETTER**

Registration Section
Division of Corporations

TO:

SU <b>BJECT</b> :	150 Zach Mead Lane, LLC					
SUINECT.		Name of Lim	ited Liability Company			
		Amendment and fee(s) are sub	_			
		Miroslav M. Fajt				
			Name of Person			
		M. Fajt Group, LLC				
		<del></del>	Firm/Company			
		24 Dockside Lane, #374				
			Address	<del></del>		
		Key Largo, Florida 33037				
			City/State and Zip Code	<del></del>		
		mfajt@fajtgroup.com				
		E-mail address: (	to be used for future annual report notification)			
For further in	nformation c	oncerning this matter, please ca	all:			
Miroslav M.	Fajt		914 659-0400 at ( )			
	Name of	Person	Area Code Daytime Telephone	: Number		
Enclosed is a	check for th	c following amount:				
□ \$25.00 F	Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	60.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)		
Reg Div P.C	iling Address gistration S vision of C ). Box 632 lahassee, I	Section orporations 7	Street Address: Registration Section Division of Corporations The Centre of Tallahasse 2415 N. Monroe Street, Tallahassee, FL 32303	æ		

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2023 OCT 11 AM 9: 59 150 Zach Mead Lane, 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 August 16, 2022 and assigned Florida document number \_L22000360695 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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) 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: Enter Florida street address

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.

City

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> Fitle</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Miroslav M. Fajt	24 Dockside Lane, #374	<b>=</b> Add
		Key Largo, Florida 33037	□Remove
			□Change
	<del></del>	<del></del>	□ Add
			□Remove
			☐ Change
			□Add
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		<del></del>	Change
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effective date	if other than t is listed, the date r e inserted in this ctive date on the	must be specific a s block does not	and cannot be prior timeet the appl	icable statutory	g or more than 90 filing requires	(optiona days after filinents, this da	d) ng.) Pursuant to 605 to will not be list	i.020 ed a
mon som	oute date on the	. Dopardiscia Oi	i diate a tecoto	J.				
ord specifie filed.	s a delayed effec	ctive date, but n	ot an effective	time, at 12:01	a.m. on the ear	tier of: (b)	The 90th day afte	r the
, October	2		2023	,				
d			_,	<u> </u>				
				//1-				
		Signature of	a member or and	horized reprocen	ntative of a memb	ж		

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