L22000428292

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

Office Use Only



400412487884

07/25/23--01023--005 *+30.00

273, FT 65 ... (10: 01

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: \\	Haven Toyest Name of Lim	Ments LLC ited Liability Company	
The enclosed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Celianthe	Name of Person	
	Yes Hav	en Investments Firm Company	LLC
	848 Brich	ell Avenue PHS	<u> </u>
	Mian	City/State and Zip Code	
	Cmorlandaris; (to be used for future annual report notifi	nents. Con
For further information ed	oncerning this matter, please ea	ali:	
Ccli carthe	Moreau Davis Person	at (<u>305</u>) <u>3511 -</u> Area Code Daytime	5596 Telephone Number
Enclosed is a check for th	e following amount:		
☐ \$25,00 Filing Fee	\$30,00 Filing Fee & Certificate of Status	LI \$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 S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monroo Tallahassee, FL	porations allahassee : Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Twes Halen Inves	tments LLC	
(<u>Name of the Limited Liability Company</u> (A Florida Limited Lia	as it now appears on our records.) bility Company)	
The Articles of Organization for this Limited Liability Company w Florida document number <u>L22000428292</u> .	rere filed on 10\04\2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	ty company here:	
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADDRESS)	. <u> </u>	<u>.</u>
	<u> </u>	
		; :
Enter new mailing address, if applicable:		<u></u>
(Mailing address MAY BE A POST OFFICE BOX)		02
B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	dress on our records, enter the nam	e of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	
	, Florida	
	Cượ	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete peacept the obligations of my position as registered agent as pro	erformance of my duties, and I am f	amiliar with and

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
		·	
			□Remove
			= Change
			□Remove
			∷ ⊐Çhange
			II Change
			□Remove
			\(\sum_\) Change
			□Remove
			— / n

f amending any other information, o	enter change(s) here: (Attach additional sheets, if necessary.)	
Amending correct	nt Authorized Person authorized	
to manage "T	Title?	
J		
[[[0-0]]	L L AMOON	
From "050" 1	to AMININ	
Authorized Perso	on name - Celianthe Mareau Davis	
		 -
		_
		
		
ffective date, if other than the date of an effective date is listed, the date must be speciote: If the date inserted in this block do ocument's effective date on the Department.	pecific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant Is locs not meet the applicable statutory filing requirements, this date will not be	o 605,020 a listed a
record specifies a delayed effective date, is filed.	e, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day	after the
aicd July 19th	<u> 2023</u>	
ſ	01120e	1 1 :
Signat	ature of a member or authorized representative of a member	, :- :
		`
<u> </u>	Typed or printed name of signee	· -
	· · · · · · · · · · · · · · · · · · ·	:

Filing Fee: \$25.00