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11/03/2022

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	Acc#I20160000072
Name:	Advenir@Callaway, LLC
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COVER LETTER

TO:		on Section f Corporations		
01215112		nir@Callaway, LLC		
SUBJE	.C1:	Name of Lit	nited Liability Company	
The enc	closed Articl	es of Amendment and fec(s) are su	bmitted for filing.	
Please r	eturn all coi	rrespondence concerning this matte	r to the following:	
		Osvaldo F. Torres, Esq.		
			Name of Person	
		Torres Law, P.A.		
			Firm/Company	
		888 Southeast Third Ave	nue, Suite 400	
			Address	
		Fort Lauderdale, Florida	33316	
		ozzie@torreslaw.net	City/State and Zip Code	
			(to be used for future annual report notification)	
For furt	her informa	tion concerning this matter, please	ealt	
Osvalde	o F. Torres		754 300-5815	
	N	ame of Person	Area Code Daytime Telepho	one Number
Enclose	rd is a check	for the following amount:		
■ \$25	5.00 Filing F	ree □ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Division P.O. Box	ion Section of Corporations	Street Address: Registration Section Division of Corporatio The Centre of Tallahas 2415 N. Monroe Street Tallahassee, F1, 32303	ssee t. Suite 810

, ,

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION FILED OF

2022 NOV -3 AH 10: 22

Advenir@Callaway, LLC

(Name of the Limited Liability Company as it now appears on our records) SEE, 11

The Articles of Organization for this Limited Liability Cor	npany were filed on	October 11, 2022	and assigned
Florida document number L22000436220			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	ed liability compan	y here:	
Advenir@Mallory Lake, LLC			
The new name must be distinguishable and contain the words "Limite	d Liability Company," t	he designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRE	<u></u>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
		······	·
B. If amending the registered agent and/or registered of agent and/or the new registered office address here: Name of New Registered Agent:	office address on ot	ir records, <u>enter the ne</u>	me of the new registered
New Registered Office Address:			
	Enter	Florida street address	
	, FloridaZıp Code		
	Cuiv		Zip Code
New Registered Agent's Signature, if changing Registered a	<u>Agent:</u>		
I hereby accept the appointment as registered agent an provisions of all statutes relative to the proper and conaccept the obligations of my position as registered age being filed to merely reflect a change in the registered company has been notified in writing of this change.	nplete performance int as provided for	of my duties, and Lan in Chapter 605, F.S. G	n familiar with and r, if this document is
	If Changing Registered	I 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
		· · · · · · · · · · · · · · · · · · ·	□Add
			□Remove
		<u> </u>	□Change
			□Add
			□Remove
			□Add
			□Remove
			Change
			□Remove
			□Change
			□Add
		□Remove	
			□Change
			OAdd
			□Remove
			□Change

	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
	
-	
(If an effecti Note: If i	date, if other than the date of filing:
he record spord is filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated No	vember 2 2022
(Signature of a member or authorized representative of a member
	Stephen L. Vecchitto
	Typed or printed name of signee