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From:

Account Name : TILLETT ALVARADO & PRENDERGAST

Account Number : I20210000002 Phone : (561)345-2416 Fax Number : (561)907-4965

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COVER LETTER

	Registration Se Division of Cor			
OT ID TO	· ·	114 AWA, LLC		
SUBJEC	.1:	Name of Lim	ited Liability Company	
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please ret	turn all correspo	ondence concerning this matter	to the following:	
		ANDREW TILLETT		
			Name of Person	
		Amendment and fee(s) are submitted for filing. Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: ANDREW TILLETT Name of Person BERKLEY 114 AWA, LLC Firm Company 3015 N OCEAN BLVD, SUITE C-114 Address OAKLAND PARK, FL 33308 City/State and Zip Code ANDREWT2060@ATT.NET E-mail address: (to be used for future annual report notification) oncerning this matter, please call: Solity Till Ti		
			Firm/Company	
		3015 N OCEAN BLVD. S	UITE C-114	
		 	Address	
		OAKLAND PARK, FL 33	3308	
		<u> </u>	City/State and Zip Code	
				tife of him
For furth	er information e			incations
ANDRE	W TILLETT			
	Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed	is a check for t	he following amount:		
□ \$25.0	00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
	Mailing Addres Registration		Registration S	
	Division of C P.O. Box 632	•		='
	r.O. Box 632 Tallahassee,			oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BERKLEY 114 AWA, LLC		
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our recommed Liability Company)	<u>rds.</u>)
The Articles of Organization for this Limited Liability Cor Florida document number L22000443988	npany were filed on 10/14/2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limite</u>	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	d Liability Company," the designation "LI	.C" 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:		
,,		
(Muiling 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:	office address on our records, <u>ente</u>	er the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addr	wit
	, 1	Florida
	νņ	

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 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
AMBR	FARINAS, ALEXEI	3015 N OCEAN BLVD. SUITE C-114	🗔 Add
		OAKLAND PARK, FL 33308	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			[] Change
AMBR	FARINAS ARTILES, ALEXEI	3015 N OCEAN BLVD. SUITE C-114	🗏 Add
		OAKLAND PARK, FL 33308	Remove
-44-47-48-48-47-48-47-48-47-48-47-48-47-48-48-48-48-48-48-48-48-48-48-48-48-48-			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			[]Remove
			□ Change
			□ Add
			Remove
			□Add
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			□Add
			□ Remove
			□ Change

pg 5 of 5

			
			
			
			
ffective date, if other than the da	ate of filing:	(optional) filing or more than 90 days after filing.) Pursuant a	
an effective date is listed, the date must by the listed in this block ocument's effective date on the Department.	k does not meet the applicable stall	filing or more than 90 days after filing.) Pursuant a story filing requirements, this date will not be	e listed as
record specifies a delayed effective of is filed.	date, but not an effective time, at 12	2:01 a.m. on the earlier of: (b) The 90th day	after the
OCTOBER 18	2022		
	1	The state of the s	a

Typed or printed name of signee