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Special Instructions to	Filing Officer:	

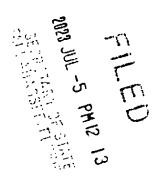




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LLC Amena

07/05/23--01010--007 **60.00



A. RAMSEY AUG 1 1 2023

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Streamline Building and Development CLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Sudan Infante Name of Person
Streamline Building and Development
716 ILex Court
West Palm Beach FL 33403 City/State and Zip Code Sudan@Streamline Deilding and development. Con E-mail address: (to be used for future angual report notification)
For further information concerning this matter, please call:
Sudan Infant at (S61) 714-8629 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount: \$\sum_{\text{S25.00 Filing Fee}} \sum_{\text{S30.00 Filing Fee}} \text{ \$\$55.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \sum_{\text{Certified Copy (additional copy is enclosed)}} \sum_{\text{S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)}} \sum_{\text{Certified Copy (additional copy is enclosed)}} \sum_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \sum_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \sum_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \sum_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \sum_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \sum_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \sum_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \sum_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \sum_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \sum_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \sum_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \sum_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \sum_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \sum_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \sum_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \sum_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \sum_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \sum_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \sum_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \sum_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \sum_{S60.00 Filing Fee, Certified Copy (addit

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2023 JUL -5 PM 12 13

Streamline Building and (Name of the Limited Liability Com (A Plorida Limited)	pany as it now appears on our records.) It is a substitute of the
The Articles of Organization for this Limited Liability Compa-	ny were filed on $10/18/22$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited li	ability company here:
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC" or the abbreviation "L.L.C."
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 and/or the new registered office address here:	ice address on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zip Code

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

Title	Name	Address	Type of Action
MgR	Anthony Hernandez	712 Laves de circle North Pala Beach FL 33408	1 BAdd
			□ Remove
			Change
MGR	Nick Infante	19182 Capet Creek Court Loxahatchee FL 33470	🖸 Add
			□Remove
			ØChange
MGR	Sudan In Funte	716 ILEX Court West Palm Beach &1 33407	🗆 🗖 Add
			□Remove
			\\ \(\sum_{\text{Change}} \)
			□Add
			Remove
			Change
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			Remove
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If amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
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Note: If the	date, if other than the date of filing:
ne record sp ord is filed.	ecifies 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	June 28th, 2023.
	Signature of a member or authorized expresentative of a member
	Sudan Infante Typed or printed name of signee

Filing Fee: \$25.00