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(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT	M AIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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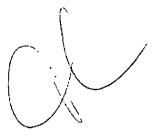




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COVER LETTER

	istration Sec ision of Corp			,		
OLIMA KERZIER	Five Eightee	n Development Limited Liab	ility Compnay			
SUBJECT:		Name of Lim	ited Liability Company			
The enclosed	l Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspor	ndence concerning this matter	to the following:			
		Jacobo Taurel				
			Name of Person		-	
		Five Eighteen Developmer	nt Limited Liability Company			
			Firm-Company	···	7877	
		800 SE 4th Ave Unit 807-1	3		NOV 17 AM 9: 55	-DATE
			Address		1 Sec. 1	5
		Hallandale Beach, Fl 3300	9		SKEE	
		jt@fiveeighteenconstruction	City/State and Zip Code		9: 55	~
		E-mail address: (to be used for future annual report notif	ication)		
For further in	iformation co	ncerning this matter, please ea	all:			
Jacobo Taure	el		214 7071315			
	Name of	Person	Area Code Daytime	Telephone Number		
Enclosed is a	check for the	e following amount:				
■ \$25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &	

Street Address: Registration Section Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Mailing Address:
Registration Section
Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Five Eighteen Development Limited Liability Compa	ny					
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	NOV					
The Articles of Organization for this Limited Liability Company Florida document number <u>L22000471238</u> .	were filed on 11/03/2022	And assigned				
This amendment is submitted to amend the following:		9: 55 9: 55				
A. If amending name, enter the new name of the limited liab	ollity company here:					
Five Eighteen Development LLC						
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	ne abbreviation "L.L.C."				
Enter new principal offices address, if applicable:	800 SE 4th Ave. Unit 807-B					
(Principal office address MUST BE A STREET ADDRESS)	Hallandale Beach, FL 33009					
Enter new mailing address, if applicable:	800 SE 4th Ave. Unit 807-B					
(Mailing address MAY BE A POST OFFICE BOX)	Hallandale Beach, FL 33009					
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>enter the 1</u>	name of the new registered				
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

<u>Title</u>	<u>Name</u>	Address	Type of Action
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		Aventura, FL 33180	■ Change
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			Remove 55 Change
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record specifies a d I is filed.	delayed effect	ive date. bu	t not an t	effective t	ime, at 12	01 a.m. or	the earli	er of: (b)	The 90th	ı day afi	er the
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