122000432120

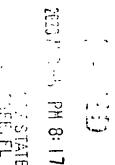
| (Requestor's Name) | |
|---|---------------------------------------|
| (Address) | 60041316 |
| (Address) | 00041010 |
| (City/State/Zip/Phone #) | 08/04/2301017 |
| PICK-UP WAIT MAIL | |
| (Business Entity Name) | |
| (Document Number) | |
| Certified Copies Certificates of Status | , , , , , , , , , , , , , , , , , , , |
| Special Instructions to Filing Officer: | |
| | |
| | |
| | the state of the state of |

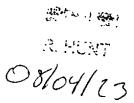
Office Use Only



1466

-025 ***+**25.00





SIMON AND SCHMIDT, PA

Attorneys At Law 766 S.E. 5th Avenue Delray Beach, Florida 33483

David W. Schmidt Ernest G. Simon (1925-2020) david@simonandschmidt.com Telephone (561) 278-2601 Fax (561) 265-0286

July 31, 2023

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

Re: 4021 Palm Lane LLC

Document No. L22000492120

Dear Ladies and Gentlemen:

Enclosed is an Amendment to the Articles of Organization for this LLC, changing the name to "1919 Lillie Street LLC". I am also enclosing our Law Account check in the amount of \$25.00 for the filing fee.

Please contact me if you require any further information.

Sincerely yours,

David W. Schmidt

in Sol

COVER LETTER

| TO: Registration S Division of Co | | | |
|---|--|---|--|
| | n Lane LLC | | |
| SUBJECT: | Name of Lin | nited Liability Company | |
| The enclosed Articles of | f Amendment and fee(s) are sub | omitted for filing. | |
| Please return all corresp | oondence concerning this matter | to the following: | |
| | David W. Schmidt | | |
| | | Name of Person | |
| | Simon and Schmidt | | ~.1 |
| | | Firm/Company | <u> </u> |
| | 766 SE 5th Avenue | | |
| | | Address | Page 47 |
| | Delray Beach, FL 33483 | | PH S |
| | whitney@eastcoastmetals.n | City/State and Zip Code | PH 8: 17 |
| | E-mail address: (| to be used for future annual report notification | on) |
| For further information | concerning this matter, please c | all: | |
| David W. Schmidt | | 561 278-2601 | |
| Name | of Person | Area Code Daytime Tel- | ephone Number |
| Enclosed is a check for | the following amount: | | |
| ■ \$25.00 Filing Fee | □ \$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) |
| Mailing Addre Registration Division of P.O. Box 63 Tallahassee, | Section Corporations 27 | Street Address: Registration Section Division of Corpora The Centre of Talla 2415 N. Monroe Str Tallahassee, FL 323 | ntions hassee reet, Suite 810 |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| 4021 Palm Lane 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 | ere filed on 11/17/2022 | _ and assigned |
| Florida document number L22000492120 | | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liabilit | ty company here: | |
| 1919 Lillie Street LLC | | |
| The new name must be distinguishable and contain the words "Limited Liability | Company," the designation "LLC" or the abbre | viation "L.L.C." |
| Enter new principal offices address, if applicable: | <u> </u> | |
| (Principal office address MUST BE A STREET ADDRESS) | <u> </u> | |
| _ | | : |
| | Or in | |
| Enter new mailing address, if applicable: | ता । सा ८७ | |
| ••• | <u> </u> | |
| (Mailing address MAY BE A POST OFFICE BOX) | <u>' </u> | 7 |
| - | | |
| B. If amending the registered agent and/or registered office adeagent and/or the new registered office address here: | dress on our records, <u>enter the name o</u> | f the new registered |
| Name of New Registered Agent: | <u> </u> | ··· |
| New Registered Office Address: | | |
| | Enter Florida street address | |
| | , Florida | |
| · · · | | 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 per accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office accompany has been notified in writing of this change. | erformance of my duties, and I am fam ovided for in Chapter 605, F.S. Or, if t | iliar with and his document is |

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> | Name | Address | Type of Action |
|--------------|------|---|----------------|
| | | | □Add |
| | | | □Remove |
| | | | □Change |
| | | | □Add |
| | | | □Remove |
| | | | ∰ ☐Change |
| | | | - |
| | | (n) | Remove |
| | | | □Change |
| | | | □Add |
| | | | □Remove |
| | | | □Change |
| | | | □Add |
| | | | □ Remove |
| | | | □Change |
| | | | 🗆 Add |
| | | | □Remove |
| | | | □ Change |

| | | | | | | _ |
|--|-------------------------------|------------------------------|--------------------------------|---|---------------------|-----------------------|
| | | | | <u>-</u> | | _ |
| | | | | | | |
| | | | | | ₽ .3 \$*22 | |
| | | | | | <u>ت</u> ن ده | <u> </u> |
| , | | | | <u> </u> | 12 | |
| | | | | <u> </u> | <u>-</u> - | · |
| | | | | SC: | P¥ | , January |
| | | | | 317A . FL | ά | t == |
| | | | • | - 18 | 7 | _ |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Effective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be possible. If the date inserted in this block does not meet the application of the date in the Department of State's reconstitution. | orior to date plicable sta | of filing or matutory filing | ore than 90 da z requiremen | (optional) ys after filing.) Pu nts, this date will | rsuant to not be | 605.0207 listed as |
| record specifies a delayed effective date, but not an effective dis filed. | ve time, at | 12:01 a.m. c | on the earlie | r of: (b) The 90 |)th day a | ifter the |
| | | | | | | |
| Dated July 31 2023 Signature of a member or as | <u> </u> | - | | | | <u>.</u> |

Filing Fee: \$25.00