## L23000021545

(Re	questor's Name)	
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	Registration Sec Division of Corp		•	4
SUBJEC	122CW, LL T:			
		Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub	_	
		Robyn Burrows		
			Name of Person	
		Nishad Khan P.L.		
			Firm/Company	
		1303 N Orange Ave		
			Address	
		Orlando, Florida 32804		
			City/State and Zip Code	<del></del>
		reception@nishadkhanlaw.c	to be used for future annual report notification)	
For furthe	r information co	oncerning this matter, please ca		~
Robyn Bu	ırrows		407 228-9711	DZ3 H
	Name of	î Person	at () Area Code Daytime Telephone	2023 HOV 27
Enclosed	is a check for th	e following amount:		PH 49
<b>■ \$25.</b> 0	0 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	660.00 Filing Fee: 2 Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address		Street Address:	

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

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

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

122CW, LLC		
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	y were filed on <u>01/10/2023</u>	and assigned
Florida document number L23000021545		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the	he 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)		
	<del> </del>	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the	name of the new registe
Name of New Registered Agent:		10y 2
Nam Basistand Office A. I		
New Registered Office Address:	Enter Florida street address	To Co
	. Florida	3: 2 FL
	City , Florida	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.

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It amending Authorized rerson(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
MGR	CHRIS ROSE, LLC	11134 RIVER GROVE DRIVE	□Add
		ORLANDO, FL 32817	■Remove
			□Change
MGR	RNC MANAGEMENT LLC	1303 N. ORANGE AVE	<b>=</b> Add
		ORLANDO, FL 32804	□Remove
			□Change
		<del></del>	□ Add
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