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SECRETARY OF STATE
DIVISION OF CORPORATIONS

Y. SCOTT 0CT 2 5 2023

COVER LETTER

	gistration Se vision of Cor			•		
CUBICT	Risen Stays	s LLC				
SUBJECT:	·	Name of Limit	ed Liability Company			
The enclose	ed Articles of	Amendment and fee(s) are subn	nitted for filing.			
Please retur	n all correspo	ondence concerning this matter t	o the following:			
		Juan Acosta				
			Name of Person			
		<u></u>				
			Firm/Company	2023 0		
		821 SW 178 WAY	Address	CT -		
	2023 OCT 16 PM 2: 10					
		PEMBROKE PINES, FLOI	City/State and Zip Code			
		juan@risenresidential.com	Chyrotac and Esp Code	<u></u>		
		E-mail address: (to	be used for future annual report notific	cation)		
For further	information c	oncerning this matter, please cal	1:			
Juan Acost	ii.		786 2344216 at ()			
	Name o	f Person		l'elephone Number		
Enclosed is	a check for th	ne 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)		
	ailing Addres		Street Address:	ion		
Registration Section Division of Corporations			Registration Section Division of Corporations			
P.0	O. Box 632	7	The Centre of Ta	llahassee		
Ta	illahassee, I	*L 32314	2415 N. Monroe	Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Risen Stays LLC					
(<u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny as it now appears on our records.) Liability Company)				
The Articles of Organization for this Limited Liability Company Florida document number <u>L23000035628</u> .	were filed on January 19, 2023	and assigned			
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabi	ility company here:				
Risen Residential LLC		Ð			
The new name must be distinguishable and contain the words "Limited Liabil Enter new principal offices address, if applicable:	ity Company," the designation "LLC" or the ab	obrevial III STOS			
(Principal office address MUST BE A STREET ADDRESS)		그 위로 기			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	uddress on our records, <u>enter the nan</u>	PH 2: 10 STATE			
Name of New Registered Agent:					
New Registered Office Address:					
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 agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office	performance of my duties, and I am j provided for in Chapter 605, F.S. Or,	familiar with and if this document is			

company has been notified in writing of this change.

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

Title	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□ Adđ
			SECRETAR DIVISION OF C
			SECRETARY OF STATE DIVISION OF CORPORATIONS 2023 OCTABLE PAR 2: 120 CORPORATIONS 122 OCTABLE PAR 2: 120 CORPORATIONS
			□Change
			□Add
			□Remove
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		·	□Add
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Effective date, if other than the fan effective date is listed, the date in Note: If the date inserted in this document's effective date on the	ust be specific a block does no	and cannot be pri of meet the appl	licable statutory	or more than 90 day			
e record specifies a delayed effect rd is filed.	ive date, but n	not an effective	time, at 12:01 a	i.m. on the earlier	of: (b) The 90t	h day after t	the
October 11		2023	, .				
Dated		11/11					
Dated	Signature of	a member or au	thorized represent	ative of a member			

Filing Fee: \$25.00