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SECRETARY OF STATE

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COVER LETTER

Division of Co			
	kle Ave, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Allen Rosenthal		
		Name of Person	
		Firm/Company	
	2951 Burnett Terrace		
		Address	
	The Villages, Florida 3216	53	
	racd44@yahoo.com	City/State and Zip Code	
	- :	to be used for future annual report not	tification)
For further information	concerning this matter, please c	all:	
John T. Marshall, Esq.		352 432-8859 att)	
Name	of Person	at () Area Code Daytir	ne Telephone 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		Street Address: Registration So	ection
Registration Division of 0	Section Corporations	Division of Co	

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Honeysuckle Ave, LLC		
(Name of the Limi	ted Liability Company as it now ap (A Florida Limited Liability Compa	pears on our records.) 1y)
The Articles of Organization for this Limited I.		January 23, 2023 and assigned
Plorida document number 1.23000040177	<u> </u>	
This amendment is submitted to amend the foll	owing:	
A. If amending name, enter the new name o	f the limited liability company	y here:
The new name must be distinguishable and contain the v	words "Limited Liability Company," t	
Enter new principal offices address, if applic	cable:	2023 SEC ALL
Principal office address MUST BE A STREE	ET ADDRESS)	ARR J
		SSS
		E
Enter new mailing address, if applicable:		7. A 1
Mailing address MAY BE A POST OFFICE	BOX)	
		<u></u>
B. If amending the registered agent and/or i		ir records, enter the name of the new regist
agent and/or the new registered office addre	ss here:	
Name of New Registered Agent:	Allen Rosenthal	
New Registered Office Address:	2951 Burnett Terrace	
New Registered Office Address.	Enter	Florida street address
	The Villages	Florida 32163
	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 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>	<u>Name</u>	Address	Type of Action
			□Remove
			□ Change
			□Add
			□Remove
			Change
		Remove	Remove
			Change
			□Add
		<u> 2000</u>	□Remove
			Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change

STATEMENT: This is a single	e-member, manager-manag	ed LLC.		
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fective date, if other than the can effective date is listed, the date must ote: If the date inserted in this blooming the comment's effective date on the Department.	be specific and cannot be prior ck does not meet the application	able statutory filing requ	(optional) 190 days after filing.) rements, this date v	Pursuant to 605.02 will not be listed
ecord specifies a delayed effective is filed.	date, but not an effective ti	me, at 12:01 a.m. on the	earlier of: (b) The	90th day after th
tted	2023		_	
		-2		
	Signature of a member or author	rized representative of a m	ember	

Filing Fee: \$25.00