123000048210

(Re	equestor's Name)	· · · · · · · · · · · · · · · · · · ·
(Ad	idress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	me)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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09/19/20--01029--602 **25.00

2023 SEP 19 MH11: 53 SECRETALY SEPTE

COVER LETTER

TO: Registration Se Division of Cor				
	07TH AVE LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspondence	ondence concerning this matter	to the following:		
	Kristina Wilson			
		Name of Person		
	KEW Legal, P.A.			
		Firm/Company	202 SE 1	
	16690 Collins Avenue Sui	11101	SECRETARY TALLARY	
		Address		
	Sunny Isles Beach, FL 331	60		
	-	City/State and Zip Code	(Fostion)	
	Kristina@kewlegal.com			
		to be used for future annual report not	fication)	
For further information of	concerning this matter, please o	all:		
Kristina Wilson		305 990-2220 at ()		
Name o	of Person	Area Code Daytin	ne Telephone Number	
Enclosed is a check for t	he following amount:			
	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addre		Street Address:	ection	
Registration Section Division of Corporations		Registration Section Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee		
Tallahassee,	FL 32314	2415 N. Monro	se Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it n (A Florida Limited Liability C	ow appears on our records.)
The Articles of Organization for this Limited Liability Company were fill Florida document number L23000048210	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability con	npany here:
The new name must be distinguishable and contain the words "Limited Liability Comp	any "the designation "I I C" or the abbreviation "I I C"
The new maine must be distinguishable and contain the words. Emined Diabling Comp	≥3 5 (***)
Enter new principal offices address, if applicable:	En m
Principal office address MUST BE A STREET ADDRESS)	
	
Enter new mailing address, if applicable:	<u> </u>
Mailing address MAY BE A POST OFFICE BOX)	
Manufacture and Control of Contro	
B. If amending the registered agent and/or registered office address agent and/or the new registered office address here:	on our records, enter the name of the new registere
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	70. 14.
Cin	, 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.

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
MGR	CTW MANAGEMENT LLC	BOX 70008 OAKLAND PARK FL 33307	□ Add
			≣Remove
			□Change
AR	Kristina Wilson	16690 Collins Avenue Suite 1101	= Add
		Sunny Isles Beach, FL 33160	🗆 Remove
			□ Change
			SECRE 19
			□Change .1
			□Remove
			□Change
			□Remove
			□ Change
			□Add
			□Remove
			□Change

Page 2 of 3

If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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if en ef Note:	ive date, if other than the date of filing:
e re The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated	September 15 Jorg. Dard Toldf St
	Signature of a member or authorized representative of a member
	DAVID GOLDFARB

Page 3 of 3
Filing Fee: \$25.00