L2300007000

(Requestor's Name)			
(Address)			
(Address)			
,			
(City/State/Zip/Phone #)			
(Oity/State/Zip/Filloffe #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
· · · · · · · · · · · · · · · · · · ·			
Special Instructions to Filing Officer:			
·			

Office Use Only



500437463175

10/04/24--01020--002 **25.00

10/22/24



COVER LETTER

TO:

Registration Section

Division of Corporations				
SUBJECT:	1321 Van	Bunen St LLC		
SUBJECT:	Name of Lim	Buren St LLC ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing		
		•		
riease return an correspo	ondence concerning this matter	to the following.		
	(Name of Person		
		Name of Person		
		Firm/Company		
		1050 Jefferson Jt Address		
	· · · · · · · · · · · · · · · · · · ·	Address		
		lblywood FL 3319 City/State and Zip Code		
	E-mail address: (mottyding @ gmail.com to be used fortuture annual report notification)		
For further information of	concerning this matter, please c	all:		
	sroel Drun	at (305) 490 1856 Area Code Daytime Telephone Number		
Name o	of Person	Area Code Daytime Telephone Number		
Enclosed is a check for t	he following amount:			
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified C	of Status &	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee	SEC 174 174	
		2415 N. Monroe Street, Suite 81 Tallahassee, FL 32303	40CT-	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1321 Van Burn St LLC	
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on $02/1/2023$ a Florida document number 123000070001 .	and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbrevia	tion "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) B. If amending the registered agent and/or registered office address on our records, enter the name of tagent and/or the new registered office address here:	he new registere
Name of New Registered Agent: Yursel Drun	
New Registered Office Address: 1050 Ffector St Enter Florida street address	
Hollywood, Florida 33	3019
City Zi _I	o 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 provisions of all statutes relative to the proper and complete performance of my duties, and I am familia	• •

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
Registred Agant	Pap Properso LLC	1050 Jefferen St Hollywood Fe 33019	□ Adđ
Hg cny		St Hollywood Fc 33019	DRemove
			□Change
	 	 	□Add
			□Remove
			🗆 Change
			□ Add
			Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			STORAGE PARTIES
			Remove 23
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: _ (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated ()Ctober 1 Signature of a member or authorized representative of a member Typed or printed name of signee DMA

Filing Fee: \$25.00