

(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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06/24/24--01017--007 **25.00



COVER LETTER

TO:

TO: Registration Se Division of Cor			
CHAIR CE		16150 LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	John P. Maas, Esq.		
		Name of Person	
	Pelaez Maas Law, PLLC		
		Firm/Company	-
	44 NE 16 Street		
		Address	
	Homestead, FL 33030		
		City/State and Zip Code	
	pat@chung18.com		
For further information c	E-mail address: (concerning this matter, please c	to be used for future annual report not all:	ification)
Candy Brownlow		305 247-7132	
Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	S30.00 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 Address Registration 5		<u>Street Address:</u> Registration Se	ection
Division of C		Division of Co	
P.O. Box 632		The Centre of	
Tallahassee.	r L <i>323</i> 14	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		5150 LLC		
(Name of the Lin	ited Liability Co (A Florida Limi	mpany as it now appear ted Liability Company)	s on our records.)	
The Articles of Organization for this Limited Florida document number <u>L23000075702</u>	Liability Comp	any were filed on Fo	2bruary 10, 2023	and assigned
This amendment is submitted to amend the fo	llowing:			
A. If amending name, enter the new name	of the limited	liability company he	<u>re</u> :	
N/A				
he new name must be distinguishable and contain the	words "Limited L	iability Company," the de	esignation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if appl	icable:	N/A		····
Principal office address MUST BE A STRE	ET ADDRESS	<u> </u>		
Enter new mailing address, if applicable:		N/A		
Mailing address MAY BE A POST OFFICE	E _{BOX})			
				1285
B. If amending the registered agent and/or		ice address on our ro	ecords, <u>enter the nar</u>	ne of the new regi
ngent and/or the new registered office addr	ess here:			28 X
Name of New Registered Agent:	N/A		···	
New Registered Office Address:	N/A		250	30
		Enter Flori	ida street address	अं
	N/A		, Florida	
		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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Wayne Chung, TEE	15950 SW 252 Street	□Add
		Homestead, FL 33031	□Remove
			≡ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Add
		 	□Remove
			□Change
	 		□Add
			□Remove
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			🗀 Add
		.	□ Remove
			□C'hanve

Co-Truste	es of the Chung Fa	mily Living	Trust dated ?	May 29, 2024				
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c. It the date	f other than the s listed, the date must inserted in this blo tive date on the De	ock does not r	neet the app	licable statuti	ling or more th ory filing req	(opti an 90 days after uirements, thi	onal) r filing.) Persuan s date will not	t to 605.02 be listed
ord specifies filed.	a delayed effective	date, but not	an effective	time, at 12:()1 a.m. on the	e earlier of: (b	The 90th da	ıy after t
od G	-17-		2024	<u></u> .				
.u	<i>i</i>)	11.						
u		Signature of a	member.or au	thorized repres	entative of a r	nember		

Filing Fee: \$25.00