

L23000086004

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : SA FINANCE & ACCOUNTING INC.
Account Number : 120190000111
Phone : (407)800-7028
Fax Number : (407)992-9407

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2024 AUG -2 PM 4:10
STATE OF FLORIDA
TALLAHASSEE OFFICE

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
PARK 001 LLC

Certificate of Status	0
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Page Count	06
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K. SALY

AUG - 6 2024 Help

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2024 AUG -2 PM 1:13
STATE OF FLORIDA
TALLAHASSEE OFFICE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PARK 001 LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:

Maria C Sousa Neiva
Name of Person

SA Finacee & Accounting Inc
Firm/Company

5728 Major Blvd Ste 307
Address

Orlando Florida 32819
City/State and Zip Code

Licenses@safinacc.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maria C Sousa at (407) 8007028
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

■

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
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
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CLERK OF CIRCUIT COURT
FALLAHASSEE, FLORIDA

PARK 001 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 02/16/2023 and assigned
on Florida document number L23000086004

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 abbreviation "L.L.C."

Enter new principal offices address, if applicable:

1432 Bartow Dr - Apt 203

(Principal office address MUST BE A STREET ADDRESS)

Celebration, FL 34747

Enter new mailing address, if applicable:

1432 Bartow Dr - Apt 203

(Mailing address MAY BE A POST OFFICE BOX)

Celebration, FL 34747

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Dib Kai Group-Investments Corp

New Registered Office Address:

5950 Lakehurst Dr - Suite 236

Enter Florida street address

Orlando

Florida

32819

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>	<u>Address</u>	<u>Type of Action</u>
<u>MGRM</u>	<u>NORTH AMERICA INVESTMENT CORP</u>	<u>5728 MAJOR BLVD STE 309</u>	<input type="checkbox"/> Add
		<u>ORLANDO, FL 32819</u>	<input checked="" type="checkbox"/> Remove
		<u></u>	<input type="checkbox"/> Change
<u>MGRM</u>	<u>DIB KAI GROUP - INVESTMENTS CORP</u>	<u>5950 Lakehurst Dr - Suite 236</u>	<input checked="" type="checkbox"/> Add
		<u>Orlando, FL 32819</u>	<input type="checkbox"/> Remove
		<u></u>	<input type="checkbox"/> Change
<u>MGRM</u>	<u>UCLEROSA, LLC</u>	<u>5950 Lakehurst Dr - Suite 236</u>	<input checked="" type="checkbox"/> Add
		<u>Orlando, FL 32819</u>	<input type="checkbox"/> Remove
		<u></u>	<input type="checkbox"/> Change
<u></u>	<u></u>	<u></u>	<input type="checkbox"/> Add
		<u></u>	<input type="checkbox"/> Remove
		<u></u>	<input type="checkbox"/> Change
<u></u>	<u></u>	<u></u>	<input type="checkbox"/> Add
		<u></u>	<input type="checkbox"/> Remove
		<u></u>	<input type="checkbox"/> Change

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TALLAHASSEE, FLORIDA
CLERK OF DISTRICT COURT

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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KALAMAZOO COUNTY, MICHIGAN

E. Effective date, if other than the date of filing: _____ (optional)

(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 August 1st, 2024

Signature of a member or authorized representative of a member

MARIA SOLEDAD DIB KAI

Typed or printed name of signee