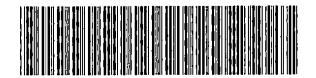
L23000171158

(Requestor's Name)
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COVER LETTER

TO:

Registration Section
Division of Corporations

O 4 1 (b) 4 47 47 (17)	or Vintage LLC	·		
Sobsect.		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:		
	Katherine L Woodbury			
		Name of Person		-
	Mingo Manor Vintage LLC	3		
		Firm/Company		
	968 Julia Heights Drive			:
		Address		a.
	Lantana, FL 33462			<u></u> د
		City/State and Zip Code		
MingoManorVintage@gma		ail.com		; . r
	E-mail address: (to be used for future annual report noti	ification)	;
For further information e	oncerning this matter, please c	ali:		
Katherine Woodbury		469 200-9377 at ()		
Name o	f Person	Area Code Daytim	ne Telephone Number	
Enclosed is a check for the	he following amount:			
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &
Mailing Addres Registration		<u>Street Address:</u> Registration Se	ection	
Division of Corporations		Division of Cor	rporations	
P.O. Box 632		The Centre of Tallahassee		0
Tallahassee,	FL 32314	2415 N. Monroe Street, Suite 810		U

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Florida document number L23000171158 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 "LLC 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 the new agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida	Mingo Manor Vintage LLC (Name of the Limited Liability Compa	ny as it now appears on our record	15.)
Florida document number L23000171158 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 "LL 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 the new agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address	(A Florida Limited I	Liability Company)	<u></u> /
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 the new agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address	The Articles of Organization for this Limited Liability Company Florida document number L23000171158	were filed on <u>04/06/2023</u>	and assigned
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LL 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 the new agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address	This amendment is submitted to amend the following:		
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 the new agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address	A. If amending name, enter the new name of the limited liab	ility company here:	
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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 the new agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address	Enter new mailing address if applicable		
B. If amending the registered agent and/or registered office address on our records, enter the name of the new agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address			
Name of New Registered Agent: New Registered Office Address: Enter Florida street address	Maining dudress MAT BE A TOST OFFICE BOAY		7.1 6
New Registered Office Address: Enter Florida street address		address on our records, <u>enter</u>	the name of the new regis
Enter Florida street address	Name of New Registered Agent:		
	New Registered Office Address:		
, Florida City Zin Code		Enter Florida street addre.	zz.
City Zip Code			orida
		City	Zip Code

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, 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>	Type of Action
AMBR	Katherine Woodbury	968 Julia Heights Drive	□Add
		Lantana, FL 33462	□Remove
			≡ Change
			□Add
			□Remove
			□Change
			☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
			□Remove ::: □Change
			□ Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			□ Change

EIN Nu	imber 92-3450407		
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Effective dan	te, if other than the date of filing: late is listed, the date must be specific and cannot be prior to date of	(option of filing or more than 90 days after fil	al) ling.) Pursuant to 605.0207 (
	date inserted in this block does not meet the applicable startfective date on the Department of State's records.	tutory filing requirements, this d	late will not be listed as t
record speci d is filed.	ifies a delayed effective date, but not an effective time, at	12:01 a.m. on the earlier of: (b)	The 90th day after the
May 1	11 2023		72
Jated	. 2023		733
K	Katherine L Woodbury		:
	Signature of a member or authorized re	presentative of a member	<u>:</u>
Ka	atherine L Woodbury		<u> </u>
	Typed or printed name		