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(Requestor's Name)
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(City/State/Zip/Phone #)
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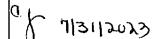




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COVER LETTER

то:	Registration Se Division of Cor			
CHO IE	8181 54th /	Ave N LLC		
SUBJE	CI:	Name of Lim	ited Liability Company	-
		Amendment and fee(s) are sub	_	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		Donovan Rodrigues		
			Name of Person	
			Firm/Company	
		8181 54th Avenue	, ,	
			Address	
		St. Petersburg, FL 33709		
		donovan Lrodrigues@gmail	City/State and Zip Code	
		E-mail address: (to be used for future annual report notific	ration)
For furth	her information c	oncerning this matter, please c	all:	
Donova	n Rodrigues		949 842-6077	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed	d is a check for th	ne following amount:		
□ \$ 25	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	■ \$60.00 Filing Fee, Certificate of Status & Certified Copy radditional copy is enclosed)
	Mailing Addres	<u>s:</u>	Street Address:	

Registration Section
Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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**



8181 54th Ave N LLC

2023 JUN 13 AM 7:50

	ited Liability Company as it now appears (A Florida Limited Liability Company)	TALL MODELE, F
The Articles of Organization for this Limited I	Liability Company were filed on Apri	
Florida document number 700406374347 L2		
This amendment is submitted to amend the fol	llowing:	
A. If amending name, enter the new name	of the limited liability company her	<u>re</u> :
The new name must be distinguishable and contain the	words "Limited Liability Company," the de-	esignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:	
Principal office address MUST BE A STRE	ET ADDRESS)	
	<u> </u>	
	<u> </u>	
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or	registered office address on our re	cords, <u>enter the name of the new reg</u>
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or	registered office address on our re	cords, <u>ent</u> er the name of the new reg
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or agent and/or the new registered office address Name of New Registered Agent:	registered office address on our rec ess here:	cords, <u>enter the name of the new reg</u>
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or agent and/or the new registered office address	registered office address on our recess here: Donovan Rodrigues 8181-54th Avenue	da street address
	registered office address on our recess here: Donovan Rodrigues 8181-54th Avenue	

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>	Address	Type of Action
MGR	Urmi Rodrigues	317 Fremantle Way	□Add
		Redington Shores, FL 33708	≣Remove
			□Change
MGR	Donovan Rodrigues	317 Fremantle Way	■Add
		Redington Shores, FL 33708	□Remove
			□Change
			□Add

			□ Add
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ective date, if other than t	he date of filing	June 5, 2023		(optional)	
ective date, if other than t reflective date is listed, the date r te: If the date inserted in this	nust be specific and	cannot be prior to da			
cument's effective date on the					
and an old an additional section	ation does how was	an afficience time	at 12.tN a mounths	and the of the The	, Out day ofter the
cord specifies a delayed effects filed.	tive date, but not	an enecuve time,	at 12.01 a.m. on the	carner or, (b)	: 90th day after the
June 5		2023			
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Filing Fee: \$25.00