## L23000189235

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

Office Use Only



500408450215

05/22/20--01029--009 \*\*80.00

FILED
SICKELESSE FLOORIO

Afrerd. 06/13/23 DC

## **COVER LETTER**

TO: Registration Section Division of Corporations
Division of Corporations  UBJECT: Majest (Dealt) Company Flor Ida LLC  Name of Limited Liability Company  the enclosed Articles of Amendment and fee(s) are submitted for filing.  lease return all correspondence concerning this matter to the following:  Michael De Phillips  Name of Person  Majest Chealty Lemany Flor da LLC  Firm/Company  GOD W. J. Apt 510  Address  Jupiter FL 33 1777  City/State and Zip Code  Michael Majest (Cealty Company)  or further information concerning this matter, please call:  Michael De Phillips  Name of Person  at (201) 316 - 5408  Daytime Telephone Number
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Michael De Phillips Name of Person
· · · · · · · · · · · · · · · · · · ·
600 WS 1, Apt 510
Jupiter, FL, 33477 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Michael Departing at (201) 316 - 5408  Area Code Daytime Telephone Number
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Habil	lity Company as it now appears on our records.)  da Limited Liability Company)		
The Articles of Organization for this Limited Liability	y Company were filed on $\frac{4/17/23}{}$	and assi	gned
Florida document number <u>L23 000189235</u>			
This amendment is submitted to amend the following	:		
A. If amending name, enter the new name of the li	imited liability company here:		
The new name must be distinguishable and contain the words "I	Limited Liability Company," the designation "LLC" or	the abbreviation "L.L	C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	DRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		SLUKET STALL AHAS	——————————————————————————————————————
B. If amending the registered agent and/or register agent and/or the new registered office address here		nanie of the new	Ti registered
	_	ු <b>ය</b>	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	Florid	la	
	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, 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
MGR	Jeff Ivall	5205 Myetlewood Citle	<b>D</b> Add
	(VP)	5205 Myrtlewood Gitle East Palm Beach Gardens FL, 33418	□Remove
			□Add
			Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
			Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

Jeff	is being	is add	دے (م	ûn c	ifficer	11112	
to	Suffic	, the	raui	rement	· 601	form	
11 7 7 7	RRE	7 "	l		-		
12151	<u>(                                    </u>	•	<del></del>	<u> </u>			
<del>_,,,,,,,</del>		<u>,</u>	<u> </u>				
<del></del>				<del></del>			
					<u></u>		
<del>_</del>							<del></del>
			<del></del> -				<del></del>
				. <u></u>		<del></del>	
					·-	<del></del>	<del></del>
			-			···	
			<del></del>				<del></del>
	<del></del>		···		<del></del>		
						· · · · · · · · · · · · · · · · · · ·	
fective date, i	f other than t	he date of filit	ig:	to date of filing or		<b>optional)</b> s after filing.) Pursuan	rto 605.0207
ote: If the date	inserted in this	block does not	meet the applica	ible statutory fil	ing requirement	s, this date will not	be listed as
eument's effect	ive date on the	e Department of	State's records.				
record specifies	a delaved effec	ctive date, but no	ot an effective ti	ne, at 12:01 a.n	n, on the earlier	of: (b) The 90th d	ay after the
is filed.	·						
N	7 .	1/14	2 4 7 3	>			
ited //	164	1614	. 2023	<u>}</u> ·			
				- <del></del>			
	,		NA				
		Signature of a	member or autho	rized epresentati	ve of a member		
		_	Deph. 11. Typed or printe				