L23000191537

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COVER LETTER

' Registration Section Division of Corporations

ARCHITEC SUBJECT:	TURAL LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing	
Please return all correspon	ndence concerning this matter	to the following:	
	Stephen Guerrero		
		Name of Person	
	Guerrero Law Group		
		Firm/Company	
	6600 Cow Pen RD		
		Address	1
	Miami Lakes, FL 33014		
	·	City/State and Zip Code	
	sguerrero@theguerrerolaw.c		
	E-mail address: (to be used for future annual report noti-	fication)
For further information co	oncerning this matter, please ca	all:	
Stephen Guerrero		954 410-4338 at ()	
Name of	Person	Area Code Daytime	e Telephone Number
Englished in about finish	o Callandina amanata		
Enclosed is a check for th	e following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy (s enclosed)

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**

ARCHITECTURAL SPACE LLC

(Name of the Limit	(A Florida Limited	Liability Company)	on our records.)	- St. 6. 6
The Articles of Organization for this Limited Li Florida document number L23000196537	ability Company	were filed on $\frac{4-20}{2}$)-2023	and assigned.
This amendment is submitted to amend the following	owing:			900
A. If amending name, enter the new name of	the limited liab	oility company her	<u>re</u> :	
The new name must be distinguishable and contain the w	ords "Limited Liabi	ility Company," the des	signation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applications	able:	6147 Hellman Av	/e	
(Principal office address MUST BE A STREE	T ADDRESS)	Fort Myers, FL 33	3905	
Enter new mailing address, if applicable:		PO BOX_366399)	
(Mailing address MAY BE A POST OFFICE I	<u>BOX)</u>	BONITA SPRING	G, FL 34136	
B. If amending the registered agent and/or reagent and/or the new registered office addres Name of New Registered Agent:	egistered office : s here: Judith Montejo		cords, <u>enter the na</u>	me of the new registere
	6147 Hellman	Ava		
New Registered Office Address:	ora, nemidi /		da street address	
	Fort Myers		, Florida $rac{3}{2}$	3905
		City	, t loi lua _	Zip Code
New Registered Agent's Signature, if changing R	egistered Agent:	<u>.</u>		

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.

Judith Montejo	
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 at or removed from our records: MGR = Manager

AMBR = Authorized Member

AMBR MONTEJO, JUDITH	e of Action
≡ R	Remove
AMBR TEJERA, ANDRE	hange
□Ac	dd
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A MBR ALPHA JOTA HOLDING LLC 6147 Hellman Ave	
Fort Myers, FL 33905	
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Filing Fee: \$25.00