Division of Corporations

# Florida Department of State

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(((H23000156988 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FILINGS, INC. Account Number : 072720000101 Phone : (954)791-2100 : (954)583-4117 Fax Number

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

### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 410 EUCLID AVENUE, LLC

Certificate of Status	0
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Electronic Filing Menu Corporate Filing Menu

Help

APR 28 2023

K. Brumbies

H23000156988

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

410 Euclid Avenue LLC		
(Name of the Lin	nited Limbility Company as it now appears on our records.) (A Fiorida Limited Liability Company)	<del></del>
The Articles of Organization for this Limited	Liability Company were filed on April 20, 2023	and assigned
Florida document number L23000205254		_
This amendment is submitted to amend the fo	llowing:	
A. If amending name, enter the new name	of the limited liability company here:	
he new name must be distinguishable and contain the	words "Limited Liability Company," the designation "LLC" or the al	obreviation "L.L.C."
Enter new principal offices address, if appli	icable:	
Principal office address MUST BE A STRE	ET ADDRESS)	
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE</u> 3. If amending the registered agent and	1/or registered office address on our records, enter	the game of the n
egistered agent and/or the new registered of	office address here:	2023 /
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		27
	Enter Florida street address	P
	, Florida	<u>.</u> ;
	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

## Harming Gyphorized 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>	Name	Address	Type of Action
MBR	Quadro Real Estate Investments LLC		☐ Add
			≣ Remove
	O. I. Berliner		Cl Change
MBR .———	Quadros Real Estate Investments LLC		<u> </u>
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			o date of filing of mor ole statutory filing	e then 90 days after requirements, this	filing.) Pursuant to 605.02 date will not be listed
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The 90th day afte	a delayed effective r the record is filed	idate, but not i.	an effective tir	ne, at 12:01 a	.m. on the earlier
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Filing Fee: \$25.00