L23000229120

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(Address)	
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PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
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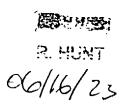
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COVER LETTER

TO: Registration S Division of Co					
	755 VT, LLC				
SUBJECT:	Name of Lin	nited Liability Company			
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	oondence concerning this matter	to the following:			
	Joel D Valencia				
	-	Name of Person			
	Boon Realty, LLC			,	٠
		Firm/Company	··		٠٠٠ ند
	550 Biltmore Way, PH2			D+ 4.1	F3 (7 13 16
		Address			5
	Coral Gables, FL 33134			255 557 5	PH 8: 4
		City/State and Zip Code	<u> </u>	11 15 15 15 15 15 15 15 15 15 15 15 15 1	6:
	joel@boonre.com	<u> </u>		L H	
For further information	E-mail address: (concerning this matter, please of	to be used for future annual report no call:	(ification)		
Joel D Valencia	,	305 471-4800 x	a 501		
Name	of Person	at () Area Code Daytii	me Telephone Number		
Enclosed is a check for	the 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 Filit Certificate Certified C (additional cr 	of Status Copy	
Mailing Addr Registration		Street Address: Registration S	ection		
-	Corporations	Division of Co			
P.O. Box 63		The Centre of		^	
Tallahassee.	, FL 32314	2415 N. Monr	oe Street, Suite 810	J	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Duplex 4755 VT, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{5/9/2023}{1}$ and assigned Florida document number 1.23000229120 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" L.L.C. ننزر Enter new principal offices address, if applicable: Ś (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 registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida

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.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MBR	Manuel Da Silva	550 Biltmore Way, PH2	□Add
		Coral Gables, FL 33134	■Remove
			□Change
MBR	Ferval Group, LLC	3065 Eden Harbor Ct	= Add
		Raleigh. NC 27613	□Remove
			□Change
			Remove 6 Phange 8: FAIR FAld
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Effect	re date, if other than the date of filing: (optio	nal)	
fan ef Note:	(option to date, if other than the date of filing:	filing.) Pursua date will no	nt to 605.020 t be listed a
	nt's effective date on the Department of State's records.		
		T1 00.1	
e reco rd is ti	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) ed.	i The 90th	uay after the
	May 1077 - 2023		
Dated	MAY 10 - 2023.		

Filing Fee: \$25.00

Typed or printed name of signee