## L23000253351

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## **COVER LETTER**

Division of Cor			•
<b>₊</b> 3636 HILL	SBORO MILE LLC		-1
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	MICHAEL RAPPAPORT		
		Name of Person	<del></del>
,		Firm/Company	
	951 HILLSBORO MILE		
	-	Address	<del></del>
	HILLSBORO BEACH, FI	_ 33062	
		City/State and Zip Code	
	mrappaport03@yahoo.co	m to be used for future annual report notif	ication)
For further information c	oncerning this matter, please co		
MICHAEL RAPPAPOF	RT	954 383-3250	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25,00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration S		Street Address: Registration Sec	tion
Division of C		Division of Corp	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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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 ED **OF**



2023 J. 1-7 PM 12: 03

3636 HILLSBORO MILE LLC

(Name of the Limited Liability Company as it now appears on our-records.) STATE (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company Florida document number L23000253357	were filed on 05/24/2023 and assigned		
Florida document number			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	660 NW 110TH AVE		
(Principal office address MUST BE A STREET ADDRESS)	PLANTATION FL 33324		
Enter new mailing address, if applicable:	660 NW 110TH AVE		
(Mailing address MAY BE A POST OFFICE BOX)	PLANTATION FL 33324		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registered		
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
<del></del> -	, Florida City Zip Code		
New Registered Agent's Signature, if changing Registered Agent:	·		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete	wee to act in this capacity. I further agree to comply with the		

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>	Name	<u>Address</u>	Type of Action
MGR	KEVIN VANMIDDLESWORTH	951 HILLSBORO MILE	□Add
		HILLSBORO BEACH FL 33062	Remove
			☐ Change
			□Add
			□Remove
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h Effective	date, if other than the date of filing:		
df an effecti	e date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605, he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be liste		1)
document	s effective date on the Department of State's records.		
It the record sr	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after	the	
ecord is filed.	· · · · · · · · · · · · · · · · · · ·	····c	
Dated	NE 5 2023		

Filing Fee: \$25.00