

L23000284256

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

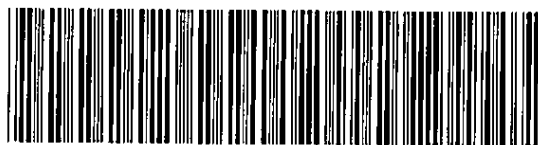
(Document Number)

Certified Copies _____ Certificates of Status _____

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OCT 11 2024

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05/23/24--01003--001 **55.00

2024 MAY 23 PM 12:12

FILED

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED
2024 MAY 23 PM 12:10

VICTORIA BH1 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 June 12, 2023 and assigned Florida document number 1.23000284256.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

VICTORIA BH18 LLC

The new name must be distinguishable and contain the words "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 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 _____
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

[illegible]

[illegible]

(If an effective 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 605.0207 (3)(b)

Dated July 10, 2024

Typed or printed name of signee

From: Ilana Nehmad
1668 Diplomat Dr
Miami FL 33179
ila7000@yahoo.com
+1 (305) 332-2441

September 12th, 2024

To: Division of Corporations
P.O. BOX 6327
Tallahassee FL 32314

Re: Dissolution of Victoria BH18 LLC / Document Number: L24000200820

Dear Sir/Madam,

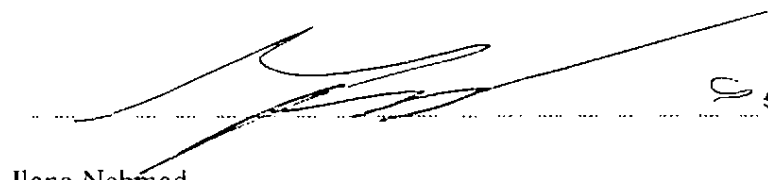
I, Ilana Nehmad, the undersigned, hereby affirm and state as follows:

I am the Authorized Person of Victoria BH18 LLC, a limited liability company with the document number L24000200820, which was previously dissolved.

1. Victoria BH18 LLC has no intention of revoking its dissolution made on May 10th, 2024.
2. By this letter, Victoria BH18 LLC hereby releases the name "Victoria BH18 LLC" for use by another entity.
3. This decision is made voluntarily and with full authority on behalf of Victoria BH18 LLC.

I declare under penalty of perjury that the foregoing is true and correct.

Sincerely,



SEPTEMBER 12TH, 2024

Ilana Nehmad
Authorized Person / Manager
Victoria BH18 LLC / Document Number: L24000200820

FILED
May 10, 2024
Secretary of State

OVER 120 DAY

ARTICLES OF DISSOLUTION

Pursuant to section 605.0707, Florida Statutes, this Florida limited liability company submits the following Articles of Dissolution:

The name of the limited liability company as currently filed with the Florida Department of State:

VICTORIA BH18 LLC

The document number of the limited liability company: L24000200820

The file date of the articles of organization: April 30, 2024

A description of occurrence that resulted in the limited liability company's dissolution:

NOT NEEDED ANYMORE

The name and address of the person appointed to wind up the company's activities and affairs:

NEHMAD ILANA
1668 DIPLOMAT DR
MIAMI, FL 33179

I/we submit this document and affirm that the facts stated herein are true. I/we am/are aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: ILANA NEHMAD

Electronic Signature of authorized person

State of Florida

Department of State

I certify from the records of this office that VICTORIA BH18 LLC was a limited liability company organized under the laws of the State of Florida, filed on April 30, 2024.

The document number of this limited liability company is L24000200820.

I further certify that said limited liability company was voluntarily dissolved on May 10, 2024.

*Given under my hand and the Great Seal of
Florida, at Tallahassee, the Capital, this the
Twelfth day of May, 2024*



A handwritten signature in black ink, appearing to be "J. B. ...", is written over a horizontal line.

Secretary of State

Authentication ID: 700429664767-051224-L24000200820

To authenticate this certificate, visit the following site, enter this ID, and then follow the instructions displayed.

<https://efile.sunbiz.org/certauthver.html>

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

VICTORIA BH1 LLC

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

FILED
2024 MAR 23 PM 12:11

The Articles of Organization for this Limited Liability Company were filed on June 12, 2023 and assigned
Florida document number L23000284256

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

VICTORIA BH18 LLC

The new name must be distinguishable and contain the words "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 ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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New Registered Office Address:

Enter Florida street address

_____, Florida _____
City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

[illegible]

[illegible]

(If an effective 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 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated July 10, 2024

ILANA NEHMAD

Typed or printed name of signee