123000312551

| (Requestor's Name) |
|--|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
| Special Instructions to Filing Officer: J. HORNE JAN 16 2025 |
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Office Use Only



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COVER LETTER

TO:

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

| TO: Registration Section Division of Corporations |
|---|
| SUBJECT: FRIENDSHIPT8 LLC |
| Name of Limited Liability Company |
| |
| The enclosed Articles of Amendment and fee(s) are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Ladda Adulsutthanon Name of Person |
| Firm/Company |
| 7175 SW 117 AUE |
| Address |
| MIAMI FL 33183 City/State and Zip Code |
| |
| E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Ladda Adul Suthanon at 305 206 6465 Name of Person Area Code Daytime Telephone Number |
| Enclosed is a check for the following amount: |
| □ \$25.00 Filing Fee Certificate of Status S55.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| Mailing Address: Registration Section Street Address: Registration Section |

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2024 DEC -3 PM 5: 08

FRIENDSHIP78 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 Florida document number $\frac{L23000312551}{}$. | were filed on $0/2^{c}$ | $\frac{1/2023}{}$ and assigned |
|---|-------------------------------|--------------------------------------|
| Florida document number <u>Lea 30 00 37 ac 33 1.</u> | | |
| 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 Liabil | ity 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 a | adduses on our records | antay the game of the new registered |
| agent and/or the new registered office address here: | idaress on our records, g | enter the name of the new registered |
| | | |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Florida street | address |
| | | Florida |
| | City | Zıp 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

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> | <u>Name</u> | <u>Address</u> | Type of Action |
|--------------|----------------------|-----------------------------------|----------------|
| MGR | JUTHALUX MATTHEWS | 7175 SW 117 AVE MIAMI FL 33183 | 🖸 Add |
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| E. Effectiv | e date, if other than the date of filing: (ontional) |
| (If an effer | the date, if other than the date of filing: |
| | nt's effective date on the Department of State's records. |
| | |
| If the record record is file | 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 inc | |
| Dated _ | 11/25/2 2024 |
| | LADDA ADVIS 01741111000 |
| | |

TO ARTICLES OF ORGANIZATION

OF

| _ FRIENDSHIP78 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 $\frac{(0/29/2023)}{12000312551}$ and assigned |
| 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." |
| 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 |
| Emer Florida Sireel dauress |
| , 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. |
| If Changing Registered Agent, Signature of New Registered Agent |

or removed from our records:

MGR = Manager

AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | Type of Action |
|--------------|----------------------|-----------------------------------|-----------------|
| MGR | JUTHALUX MATTHEWS | 7175 SW 117 Ave MIAMI FL 33183 | □Add |
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| 2. Effective date, if other than the date of filing: (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.) Pursuani to 603 07. Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records. 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 date of the date of the specifies and control of the specifies and control of the specifies and control of the specifies and cannot be prior to date of filing or more than 90 days after filing.) Pursuani to 603 07. Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records. 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 cord is filed. Dated | | |
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| /ADDA ADVIS 01711A~0~1 | Dated _ | 11/25/2 , 2024 |
| mile in the control to the control t | | LADDA ADVIS 017 HANON |
| Signature of a member or authorized representative of a member | | |

Filing Fee: \$25.00