123000313800

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:
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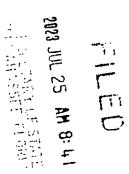
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LLCNG Amena



A. RAMSEY AUG 21: 2023

COVER LETTER

TO: Registration So Division of Cor			
31 NE 64 S SUBJECT:	ST LLC		
SUBJECT.	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Kevin Insua		
		Name of Person	
		Firm/Company	
	13305 SW 1 TE		
		Address	
	Miami, FL 33184		
	kevininsua@gmail.com	City/State and Zip Code	
	E-mail address: (to be used for future annual report noti	fication)
For further information of	concerning this matter, please c	all:	
Kevin Insua		305 502-3224 at ()	
Name o	of Person	Area Code Daytim	ne Telephone Number
Enclosed is a check for the	he 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 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration		Street Address: Registration Se	ction
Division of C		Division of Cor	

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

31 NE 64 ST LLC

company has been notified in writing of this change.

2023 JUL 25 AM 8:41

(<u>Name of the Limited Liability C</u> (A Florida Lim	ompany as it now appears on our recording the Liability Company).	<u>ds.)</u> 27. STATE 7. Et no A
The Articles of Organization for this Limited Liability Comp		~ "
Florida document number L23000313800		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
431 NE 64 ST LLC		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES.	<u>s)</u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of	fice address on our records, <u>enter</u>	the name of the new register
agent and/or the new registered office address here:		
None of New Decisional Assess		
Name of New Registered Agent:	 	
New Registered Office Address:	Enter Florida street addre	
	City , F	lorida
	•	<i>λιμ</i> τους
New Registered Agent's Signature, if changing Registered Agent's Signature, if changing Registered Agent's Agent's Signature, if changing Registered Register		
I hereby accept the appointment as registered agent and	agree to act in this capacity. I fi	irther agree to comply with t
provisions of all statutes relative to the proper and compaccept the obligations of my position as registered agent		
being filed to merely reflect a change in the registered of		

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	Address	Type of Action
			□Add
			□Remove
			□Change
			□Remove
			□Change
			□Add
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		·	□Remove
			□ Change

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ective date, if other than	in the date of filing: (optional) (optional)
te: If the date is listed, the da	ate must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0 this block does not meet the applicable statutory filing requirements, this date will not be listed
cument's effective date on	the Department of State's records.
cord specifies a delayed ef	ffective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after t
is filed.	
ted July 15	2023
2	
1	
7	Signature of a member or authorized representative of a member
-	
Kevin Insua	