L23000372270

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COVER LETTER

Division of Cor						
PROJECT:	ENZO L.L.C.					
SUBJECT.	Name of Lim	ited Liability Company				
The analoged Amieles of	Amendment and fee(s) are sub	mitted for filian				
Please return all correspo	ondence concerning this matter	to the following:				
	Yenny Ceballos					
		Name of Person				
	PROJECT ENZO L.L.C.					
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				in Sign		
		City/State and Zip Code		2024 SEP 30 AH 10: 06		
	Miami, FL 33143 E-mail address: (to be used for future annual report noti	fication)	当場で		
For further information c	oncerning this matter, please ca	all:				
Yenny Ceballos		305 968-1996				
Name o	f Person	at () Area Code Daytim	e Telephone Number			
Enclosed is a check for the	ne following amount:					
	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of Certificate Control Con	of Status & opy		
<u>Mailing Addres</u> Registration S		<u>Street Address:</u> Registration Sec	etion			
Registration Section Division of Corporations		Registration Section Division of Corporations				
P.O. Box 632	.7	The Centre of T	allahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PROJECT ENZO L.L.C.		
(Name of the Limited Liability Compar (A Florida Limited L	y as it now appears on our records.) lability Company)	
The Articles of Organization for this Limited Liability Company of Florida document number L23000372270	were filed on <u>08/08/2023</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or	
Enter new principal offices address, if applicable:		2024 SEP
(Principal office address MUST BE A STREET ADDRESS)		S
		ω
		0 = 11
Enter new mailing address, if applicable:		SSE E O
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office as agent and/or the new registered office address here:	ddress on our records, <u>enter the</u>	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	da
	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

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>	Address	Type of Action		
MGR	DUSTIN GREENWELL	5975 SUNSET DRIVE UNIT 402. Miami, FL 331	3143 □ Add		
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Effective date, if of If an effective date is li	isted, the date must be	specific and	cannot be pric	or to date of fi	ling or more t	han 90 days afi	tional) er filing.) P	arsuant to 6	05.020
Note: If the date in document's effective	serted in this block re date on the Depa	does not m rtment of Si	eet the applitate's record	icable statut ls.	ory filing re	quirements, t	his date wi	ll not be li	sted a:
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ne record specifies a	delayed effective d	ate, but not	an effective	time, at 12:0	91 a.m. on t	ne earlier of:	(b) The 9	Oth day af	ter the
ord is filed.									
September 2	3rd		2024						
Dated	(1V/0	1/0		·					
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