123000 375450

	Requestor's Name)
	Address)
(/	Address)
((City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Business Entity Name)
(0	Document Number)
Certified Copies	Certificates of Status
Special Instructions to F	iling Officer:

Office Use Only



100413608591

OIVISION OF CORPORATIONS

08/24/23--01001--028 **50.00

O8/24/23

RECEIVED
2029 AUG 24 PH 1: 30

TO ARTICLES OF ORGANIZATION OF

LEN STOREY, LLC			
(Name of the Limited Liability Compar (A Florida Limited L	ty as it now appears on our re liability Company)	cords.)	
The Articles of Organization for this Limited Liability Company Florida document number L23000375450	were filed on AUGUST 9,	2023 and assigne	∌d
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 the abbreviation "L.L.C	117
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			<u> </u>
			3 55
		106	
Enter new mailing address, if applicable:		t,	
Mailing address MAY BE A POST OFFICE BOX)			
Maning dutiess MAT DE ATOST OFFICE BOAT			.c. 114 10480 431 10480 431
		<u>. </u>	5 8 S
If amending the registered agent and/or registered office agent and/or the new registered office address here:	ddress on our records, <u>e</u>	nter the name of the new	
Name of New Registered Agent:			
Navy Bassissand Office Address			
New Registered Office Address:	Enter Florida street d	address	
		_, Florida	
	City	Zip Code	
w Registered Agent's Signature, if changing Registered Agent:			
ereby accept the appointment as registered agent and agre- ovisions of all statutes relative to the proper and complete p cept the obligations of my position as registered agent as pi ing filed to merely reflect a change in the registered office of inpany has been notified in writing of this change.	performance of my duti rovided for in Chapter	es, and I am familiar with 605, F.S. Or, if this docu	h and ment is

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	NATALIA GUZMAN	12470 VITTORIAWAY	
		FORT MYERS, FLORIDA 33912	■Remove
			☐ Change
· 			□Add
•			□Remove
			Change
			2020 OF CORPORATION O
			 ට ණිණිට දුරු
			———□ARS
			□Remove
			
			□ Remove
			□Remove
			□Change

		_
	2 <u>0</u>	(
	A.U.	•
	524	
	PM 5	
		, ,
		_
Sective date, if other than the date of siing:	15, 2023 (optional)	
n effective date is lested, the date usest be specific and cannot be properly. If the date inserted in this block does not meet the applic	to date of filing or more than 90 days after filing) Perso	ecili or h
comens's effective date on the Department of State's records	and amond the balance with his and a second	•••
	(m. 1801 a	a
cord specifies a delayed effective date, but not an effective t s filed.	inc, at 12.01 a m. on the earlier of (o) the 900	. 64
. AUGUST 15 2023		
AUGUST 15 2023	_ ·	
	Λ Λ /	
Jenn f	4-16	