123000434766

(Requestor's Name)
(Address)
(Address)
(
(Cit. (Ct.) - (7) - (D) 40
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
definited dopped
Special Instructions to Filing Officer

Office Use Only



500418520345

11/07/29--01035--017 **25.00

2023 NOV = 7 PH 2: 50 S FORE LAND

COVER LETTER

	gistration Section ision of Corporation	15			
UD IECT.	EL SHADDAI RE I	NVESTMENTS, LLC			
UBJECT:	Name of Limited Liability Company				
ne enclosec	l Articles of Amendn	uent and fee(s) are submi	itted for filing.		
ease return	all correspondence c	oncerning this matter to	the following:		
	Саги	nen Cuc			
			Name of Person		
	EL S	HADDAI RE INVEST	MENTS, LLC		
			Firm/Company		
	520 1	N. 69 AVE			
			Address		
	HOL	LYWOOD, FL 33024			
	City/State and Zip Code				
	carme	ncuel@gmail.com			1023 1723 1723
		E-mail address: (to	be used for future annual report n	otification)	
r further ir	iformation concerning	g this matter, please call:	:		
armen Cue			954 628-2765		2023 NOV - 7 FE 2:
	Name of Person		at () Area Code Days	ime Telephone Nu	mber .
iclosed is a	check for the following	ing amount:			
≡ \$ 25.00 F		0.00 Filing Fee & ertificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Cert Cert	00 Filing Fee, ificate of Status & ified Copy tional copy is enclosed)

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EL SHADDAI RE INVESTMENTS, 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 $\frac{09/19/2023}{1}$ and assigned Florida document number L23000434766 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: EL SHADDAI RE INVESTMENTS-520, 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) 5 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 ___

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.

City

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
			□Add
			□Remove
			□ Change
			□Add
			Remove
			Remove
			□ Add
			77.0 1
		<u></u>	□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			ClC'hanna

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (optional) (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) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the 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 record is filed. Dated Signature of a member or authorized representative of a member Carmen Cue

Typed or printed name of signee