# L33000435848

(Re	equestor's Name)	
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Certified Copies	_ Certificate:	s of Status
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## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 · Tallahassee, Florida 32301 (850) 224-8870 · 1-800-342-8062 · Fax (850) 222-1222

Grove Invest LLC		·
Please Debit FCA0000	000003 For: 25	-
Thank you Seth Neele	y	
Staf		Art of Inc. File
		LTD Partnership File
		Foreign Corp. File
		L.C. File
		Fictitious Name File
		Trade/Service Mark
		Merger File
		Art, of Amend, File
		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
		Cert. Copy
		Photo Copy
		Certificate of Good Standing
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		Certificate of Fictitious Name
		Corp Record Search
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4		Fictitious Search
Signature	· · · · · · · · · · · · · · · · · · ·	Fictitious Owner Search
		Vehicle Search
		Driving Record
Requested by:		UCC 1 or 3 File
Name	Date Time	UCC 11 Search
Nume	Date Time	UCC 11 Retrieval
Walk-In Thomselve SA &DC	Will Pick Up	Courier

#### **COVER LETTER**

TO: Registration Se Division of Con			
SUBJECT: Grove Inve	est, LLC		
		nited 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:	
	Jonathan N. David, Esq.		
		Name of Person	
	Law Office of Jonathan N	. David, Esq., P.A.	
		Firm/Company	
	9500 S. DADELAND BL	VD., SUITE 600	
		Address	
	MIAMI, FL 33156		
		City/State and Zip Code	
	jdavid@southmiamilegal.co	om to be used for future annual report not	(flootion)
For further information c	oncerning this matter, please c	•	incaton)
Jonathan David		at (305) 665-9895	
Name o	f Person		e Telephone Number
Enclosed is a check for th	ne 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		Street Address:	
Registration S Division of C		Registration Se Division of Cor	
P.O. Box 632		The Centre of 7	-

Tallahassee, FL 32314

TO:

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

(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 9/19/2023 and assign Florida document number 23000435848  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 "LLC"  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailling 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 reagent and/or the new registered Agent:  New Registered Office Address:  Jonathan N. David, Esq.  Suite 600  New Registered Office Address:  Jonathan N. David, Esq.  Senter Florida street address  Enter Florida street address	GROVE INVEST LLC			
The Articles of Organization for this Limited Liability Company were filed on 9/19/2023 and assign Florida document number 23000435848  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 "LLC 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 office address here:  Name of New Registered Agent:  New Registered Office Address:  9500 S. Dadeland Blvd., Suite 600  Finer Florida were address.	(Name of the Lim	ited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)	<del> </del>
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, 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 reagent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Jonathan N. David, Esq.  Finer Florida street address  Finer Florida street address  Finer Florida street address  The street addr	The Articles of Organization for this Limited I	iability Company v		and assigned
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 address here:  Name of New Registered Agent:  New Registered Office Address:  Jonathan N. David, Esq.  State Florida street address.  Fater Florida street address.	This amendment is submitted to amend the fol	lowing:		
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 reagent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  9500 S. Dadeland Blvd.  9500 S. Dadeland Blvd. Suite 600	A. If amending name, enter the new name	of the limited liabil	ity company here:	
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 reagent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  9500 S. Dadeland Blvd. Suite 600  Finter Elorida street address  Finter Elorida street address  Finter Elorida street address	The new name must be distinguishable and contain the	words "Limited Liabilit	y Company," the designation "LLC" or the al	obreviation "L.L.C."
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 reagent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  9500 S. Dadeland Blvd. Suite 600  Finter Elorida street address  Finter Elorida street address  Finter Elorida street address	Enter new principal offices address, if appli	cable:	9500 S. Dadeland	Blvd.
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:  9500 S. Dadeland Blvd., Suite 600  Enter Florida street address.	(Principal office address MUST BE A STRE	ET ADDRESS)	Suite 600 Miami FL 3	3156
B. If amending the registered agent and/or registered office address on our records, enter the name of the new reagent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  9500 S. Dadeland Blvd., Suite 600	Enter new mailing address, if applicable:		9500 S. Padelane	(Blvd.
Name of New Registered Agent:  New Registered Office Address:  9500 S. Dadeland Blvd., Suite 600  Finter Florida street address:	Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	Miami FL 3315	76
New Registered Office Address:  9500 S. Dadeland Blvd., Suite 600  Enter Florida street address			ldress on our records, enter the nam	
New Registered Office Address:  9500 S. Dadeland Blvd., Suite 600  Enter Florida street address	Name of New Registered Agent:	Jonathan N. Davi	id, Esq.	DEC
Enter Florida street address	New Registered Office Address:	9500 S. Dadeland		- N
Miami , Florida 33156 9		Miami	· ••	156 99
City Zip Code			City	: Zip Code

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	Jonathan N. David, Esq.	9500 S. Dadeland Blvd., Suite 600, Miami 33156	\overline Add
			□Remove
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	<del></del>	<del></del>	□Add
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Effect	tive date, if other than the date of filing: (optional) fective 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)
Note:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
docun	nent's effective date on the Department of State's records.
ne recor ord is fi	rd 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 led.
Dated	December 2nd , 2024
~,,,,,,,,,,,	
~ w.vu	Sust W
~4100	Jonathan N. David, Esq., as afterney-in-fact for MI.M. LLC (WY)  Typed originated name of signee

Filing Fee: \$25.00