

L23000452930

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(City/State/Zip/Phone #)

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DATE: 10/29/2024

NAME: AHST 342 LLC

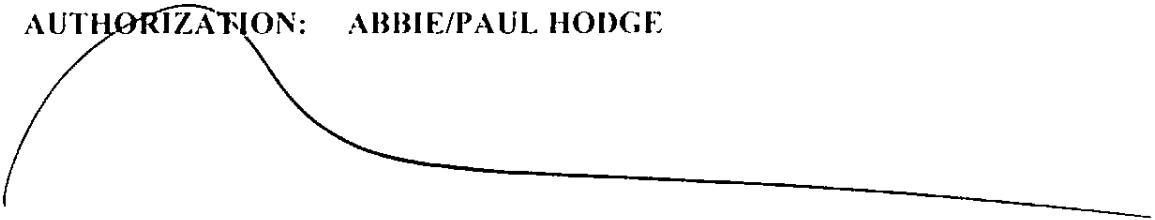
TYPE OF FILING: AMENDMENT

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AUTHORIZATION: ABBIE/PAUL HODGE



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AHST 342 LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rebecca L. Parsons

Name of Person

Firm/Company

58 Marblewood Place

Address

Spring, TX 77381

City/State and Zip Code

beckypa@icloud.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rebecca Parsons

Name of Person

at (832) 721-4990

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

Mailing Address:

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

Street Address:

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
OF**

AHST 342 LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

2024 OCT 29 11:09:25

The Articles of Organization for this Limited Liability Company were filed on October 23, 2023 and assigned
Florida document number L23000482930

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 "L.L.C."

Enter new principal offices address, if applicable:

58 Marblewood Place

(Principal office address MUST BE A STREET ADDRESS)

Spring, TX 77381

Enter new mailing address, if applicable:

58 Marblewood Place

(Mailing address MAY BE A POST OFFICE BOX)

Spring, TX 77381

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

City

Florida

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

~~in 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>	<u>Address</u>	<u>Type of Action</u>
AMBR	API Stewart Holdings LLC	1420 Rocky Ridge Dr. Ste 270	<input type="checkbox"/> Add
		Roseville, CA 95661	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Rebecca L. Parsons	58 Marblewood Place	<input checked="" type="checkbox"/> Add
		Spring, TX 77381	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Greg Parsons	58 Marblewood Place	<input checked="" type="checkbox"/> Add
		Spring, TX 77381	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

[illegible]

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 09/13/24

- DocuSigned by:

Rebecca L. Parsons

~~CONFIDENTIAL~~

Signature of a member or authorized representative of a member

Rebecca L. Parsons

Typed or printed name of signee

Filing Fee: \$25.00