O 12-15-2023 5:38 PM



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Division of	Corporations
Fax Number	: (850)617-6383

From:

To:

Account Name : NELSON MULLINS RILEY & SCARBOROUGH, ORLANDO Account Number : I19980000090 Phone : (407)839-4200 Fax Number : (407)839-4264

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Emai	l Address:		
AH II: 01 REFERENCE	C AMND/RESTATE/CORRI 618 12TH AVENUE 1		
<b>6</b>	Certificate of Status	0	
	Certified Copy	0	<del></del>
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Electronic Filing Menu Corporate Filing Menu

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ARTICLES OF A	MENDMENT	•
T	)	
ARTICLES OF O	RGANIZATION	<u>بر</u>
· · · · · · Ol	<del>,</del>	
618 12TH AVENUE NORTH, LLC		
(Name of the Limited Limited Company) (A Florida Limited L	ability Company)	
The Articles of Organization for this Limited Liability Company of	very filed on November 3, 2023	and sanisand
Florida document number	were med on	and assigned
Piorida cocument number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liable	lity company here:	
681 12TH AVENUE NORTH, LLC	ter company net e.	
The new name nunst be distinguishable and contein the words "Limited Liabili	by Company <sup>16</sup> the designation <sup>10</sup> 1 C <sup>10</sup> or the side	eviation 19 L C P
	y company, are designation. EEC of the boot	19901011 <u>2.2.</u> 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 as	ddress on our records, <u>enter the name o</u>	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	Zip Code
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		<u>'</u>
I hereby accept the appointment as registered agent and agre		
provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p		
being filed to merely reflect a change in the registered office of		
company has been notified in writing of this change.	- •	·

If Changing Registered Agent, Signature of New Registered Agent

29

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If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added</u> or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
			⊡Add
		·····	🗆 Remove
			Change
			🗆 Add
			CiRemove
			Change
			LiAdd
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Note: If the date inserted in	an the date of filing: late must be specific and cannot be prior to d this block does not meet the applicable in the Department of State's records.	(optional) late of filing or more than 90 days after filing ) P e stanilory filing requirements, this date w	histoant to 605,0207 (3)(1 ill not be listed as the
If the record specifies a delayed of ecord is filed.	effective date, but not an effective time,	at 12:01 a.m. on the carlier of: (b) The 9	50th day after the
Dated 2		d representative of a member	
	Signature of a greater or authorize		

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

Typed or printed name of signee

Orlando Lorenzo Member

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