L23 000 504 536

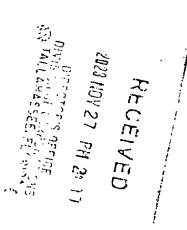
(Req	uestor's Name)	
(Addi	ress)	
(Addr	ress)	
,	,	
(City/	/State/Zip/Phone #)	
PICK-UP	☐ WAIT ☐ MA	11
L / lektor		
(Puei	ness Entity Name)	
KUO)	ness chury Mairie)	
(Doc	ument Number)	
Certified Copies	Certificates of Status	_
Special Instructions to Filing	Officer:	

Office Use Only



600418402516

2023 NOV 27 PK 2: 15



FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

11/27/23

NAME: 1974 MIAMI BEACH LLC

TYPE OF FILING: AMENEMENT

COST:

25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO: Registration Sec Division of Corp	tion perations		
1974 MIAM	I BEACH LLC		
SUBJECT:	Name of Limite	d Liability Company	
	Amendment and fec(s) are subm		
Picase return all correspon	nuence concerning one mater a	,	
	Julian Mancinelli		
		Name of Person	
	1974 MIAMI BEACH LLC		
		Firm/Company	
	1974 MARSEILLE DR		
		Address	
	MIAMI BEACH, FL		
		City/State and Zip Code	
	julianmancinelli22@gmail.c		
		o be used for future annual report notif	ication)
For further information of	concerning this matter, please co	all:	
Julian Mancinelli		561 2552475	
Name o	of Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check for t	he 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)
<u>Mailing Addre</u> Registration		Street Address: Registration S	
Division of Corporations		Division of Co The Centre of	
P.O. Box 6327			oe Street, Suite 810

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1974 MIAMI BEACH LLC	
(Name of the Limited Liability Company as it of A Florida Limited Liability Company	ow appears on our records.) ompany)
The Articles of Organization for this Limited Liability Company were fill Florida document number L23000504536	ed on 11/06/2023 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability con	npany here:
The new name must be distinguishable and contain the words "Limited Liability Compa	any," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	21
(Principal office address MUST BE A STREET ADDRESS)	2f23 f.OV
	27
Enter new mailing address, if applicable:	-0 , .
(Mailing address MAY BE A POST OFFICE BOX)	~
B. If amending the registered agent and/or registered office address of agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	n our records, enter the name of the new registers
	Plants
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 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
MGR	JF DEVELOPERS USA LLC	3179 HOYLAKE RD	
		LAKE WORTH FL 33467	□ Remove
			Change
MGR MDT DEVELOPERS LLC	3179 HOYLAKE RD		
	LAKE WORTH FL 33467		
			Change
		 	□Add
			Remove
			Change
			□ Add
			□ Remove
		 	☐ Change
			□Add
		□Remove	
			□Change
		□Add	
			□Remove
			□ Change

-	
_	
_	
-	
_	
-	
_	
_	
_	
_	
_	
_	
_	
_	
E. Effectiv	re date, if other than the date of filing: (optional) tive 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: I	f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nt's effective date on the Department of State's records.
f the record ecord is file	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 d.
Dated_	11/27 2023
	Signature of a member or authorized representative of a member
	JULIAN MANCINELLI
	Typed or printed name of signee

Filing Fee: \$25.00