## L24000018280

(R	equestor's Name)	<del></del>
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PICK-UP	WAIT	MAIL
(Bi	usiness Entity Nar	me)
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Certified Copies	Certificate:	s of Status
Special Instructions to	Filing Officer:	-
		J. HORNE
		J. HORNE NOV 1 - 2024
	<u>.</u>	

Office Use Only



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## **COVER LETTER**

TO:

Registration Section

Division of Co	rporations		
19993 DI.	NIE LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Steven Elegado		
		Name of Person	
	*	Firm/Company	
	2460 Dundee Rd., #1502	_	
		Address	· · · · · · · · · · · · · · · · · · ·
	Northrbook IL 60062		
		City/State and Zip Code	
	dgrois@gmail.com		·
For further information (	concerning this matter, please c	to be used for future annual report in all:	otification)
Steven Elegado		312 772-5838 at ()_	
Name o	of Person		ime Telephone Number
Enclosed is a check for t	he following amount:		
<b>■</b> \$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 Addre Registration Division of C P.O. Box 632	Section Corporations 27	Street Address: Registration S Division of Co The Centre of	orporations `Tallahassee
Tallahassee,	F1. 32314	2415 N. Monr	roe Street, Suite 810

Tallahassee. FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

19993 DIXIE 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 01/08/2024 and assigned Florida document number | L24000018280 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." 101 NE 3rd Ave., Suite 1500 Enter new principal offices address, if applicable: Fort Lauderdale, FL 33101 (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 agent and/or the new registered office address here: Drew Melville Name of New Registered Agent: 101 NE 3rd Ave., Suite 1500 New Registered Office Address: Enter Florida street address Fort Lauderdale City

## 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.

f 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
AR	MEJIA, MICHELLE, ESQ.	66 WEST FLAGLER STREET. 9TH FLOOR	□Add
		MIAMI, FL 33130	<b>≡</b> Remove
			□Change
AR Steven Elegado	Steven Elegado	2460 Dundee Rd., #1502	<b>=</b> Add
	Northrbook IL 60062	□Remove	
		<del></del>	□Change
			□Add
		🗀 Remove	
			□Change
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Effecti	e date, if other than the date of filing:
tore.	re date, if other than the date of filing:
record rd 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 _	10-10 2024
	Lyn Quit
	Signature of a member or authorized representative of a member

Typed or printed name of signee