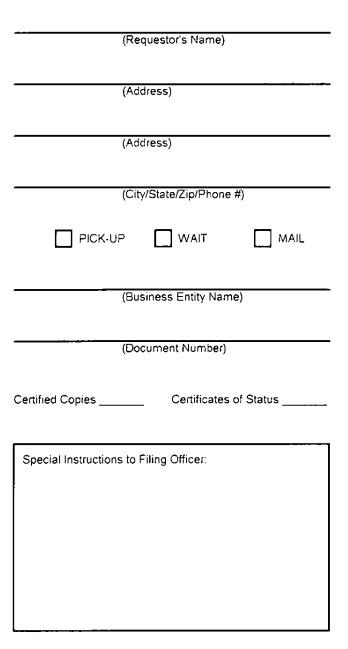
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COVER LETTER

Division of Cor	pozations	4 4	
5481 RAY SUBJECT:	STREET, LLC		
10bbec1.		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Kishane J. Patel		
		Name of Person	
	KJP Counsel PLLC		
	• • • •	Firm/Company	
	8180 Pensacola Blvd - Sui	te 100	
		Address	
	Pensacola, Florida 32534		
		City/State and Zip Code	
	Kishane@kjpcounsel.com		
For further information c	oncerning this matter, please co	o be used for future annual report notiful:	ncanon)
Kishane J. Patel		850 346-9356 at ()	
Name o	f Person	Area Code Daytime	: Telephone Number
Enclosed is a check for th	ne following amount:		
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 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

5481 RAY STREET, LLC			
(<u>Name of the Limite</u>	d Liability Compa A Florida Limited	any as it now appears on our record Liability Company)	<u>(s.</u>)
The Articles of Organization for this Limited Lia	ability Company	were filed on 1/30/2024	and assigned
lorida document number 1.24000055959			
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liab	oility company here:	
644 RAY STREET, LLC			
he new name must be distinguishable and contain the wo	ords "Limited Liabi	lity Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	NO CHANGE	
Principal office address MUST BE A STREET ADDRESS)			——————————————————————————————————————
		 	under des de
			. 'O
Enter new mailing address, if applicable:	NO CHANGE	4 ~	
Mailing address MAY BE A POST OFFICE B			
			်
3. If amending the registered agent and/or regent and/or the new registered office address		address on our records, <u>enter</u>	the name of the new regis
Name of New Registered Agent:	NO CHANGE		
New Registered Office Address:			
		Enter Florida street addres.	3
		Fic	orida
	•	City	Zin 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

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

Title	<u>Name</u>	<u>Address</u>	Type of Action
	NO CHANGE	NO CHANGE	
			□Remove
			□Remove
			☐ Change
			□ Remove
			Change
		 	□ Add
			□ Remove
			Change
			
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	NO CHANGE
in effe <u>ote:</u> I	te 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 fithe date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as not's effective date on the Department of State's records.
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.
ited _	MARCH 4TH 2024)
	Signature of a member or authorized representative of a member

Typed or printed name of signee