# L24000072152

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## **COVER LETTER**

### TO: Registration Section Division of Corporations

Davenpark LLC

SUBJECT: \_\_\_\_

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

 Michael Robaina

 Name of Person

 Davenpark LLC

 Firm Company

 5817 N Cameron Ave

 Address

 Tampa, Fl 33614

 City/State and Zip Code

 Jacobsgoldstein@gmail.com

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

 For further information concerning this matter, please call:

 Jacob S Goldstein

 813
 397 8291

 at ( \_\_\_\_\_\_\_)

 Image: status status

<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314 Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite \$10 Tallahassee, FL 32303 

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

### Davenpark 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 02/08/2024 \_\_\_\_\_\_ and assigned Florida document number L24000072152 \_\_\_\_\_\_.

This amendment is submitted to amend the following:

### A. If amending name, enter the new name of the limited liability company here:

Davonpark LLC

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: Image: Constraint office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: Image: Constraint office address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Image: Constraint office address (from the form of the form o

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:		<u>.</u>
New Registered Office Address:	Enter Florida street a	ddress
		, Florida
	City	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>	<u>Name</u>	Address	Type of Action
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D. If amending any other information, enter change(s) here: (Attach additional sheets, (fnecessary.)

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Oct 20, 2024 Dated	·	LA	CT 3	5.000 (75.000)
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	Signature of a member of authorized representative of a member	n o TA	1:0	1
Jacob Goldstein, N	lanager	ا <sup></sup> ۲۰۰۱	ē	

Typed or printed name of signee