LZ4000081059

(Requestor's Name)
(Address)
(Addiess)
(Address)
(City/State/Zip/Phone #)
(Only/State/Zip/i Hone #)
PICK-UP WAIT MAIL
(Business Entity Name)
,
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400425202504

03/08/24--01021--003 **25.00

3/2/124

TILEU

2024 HAR ZB AH 8: 46
SECRETERS SEE. FL

COVER LETTER

	stration Section sion of Corporations
CUDIFCT.	2400 East Robinson Street, LLC
SUBJECT:	Name of Limited Liability Company
The enclosed	Articles of Amendment and fee(s) are submitted for filing.
Please return	all correspondence concerning this matter to the following:
	Charlotte Ustler Name of Person
	Ustler Development, Inc.
	800 N. Drange Ave., Suite 200
	Orlando, FL 32801 City/State and Zip Code
	Charlotte@ustler.net E-mail address: (to be used for future annual report notification)
For further in	formation concerning this matter, please call:
_Char	Name of Person at (407) 7510 · 7877 Area Code Daytime Telephone Number
Enclosed is a	check for the following amount:
໘ \$25.00 Fi	ling Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is Filosephile)
Reg Div P.O	ing Address: istration Section Registration Section Division of Corporations Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2400 East Robinson Street, LLC The Articles of Organization for this Limited Liability Company were filed on FEDOVAN 14, 2024 and assigned Florida document number L2H000081059 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." 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 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: New Registered Office Address: Enter Florida street address _, Florida ___ 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, It this desument 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

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	Craig T. Ustler	800 N. Orange Ave, Suite 200	X Add
		Orlando, FL 32801	_ □Remove
			_ Change
MER	Ustler Development, Inc.	800 N. Orange Ave, Suite20	
		Orlando, FL 32801	XRemove
			_ □Change
			□Add
			□Remove
			_ Change
			□Add
			□Remove
			_ Change
			_ □Add
		A C	S □ 22 move
		AHASSE	
		F A	œ 🗇

		 		<u> </u>		
			<u>-</u>			
.		 			···	
		 -				
		 				
	- "	 · · · · · · · · · · · · · · · · · · ·				
		 	<u>.</u>	B. S. S.		

Filing Fee: \$25.00