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COVER LETTER

Division of Co	_				
SUBJECT:	220 PLYMOUTH RD LLC				
Name of Limited Liability Company					
The enclosed Articles of	f Amendment and fee(s) are submitted for filing.				
Please return all corresp	condence concerning this matter to the following:				
	ALICIA G. BAUMILLER				
Name of Person					
Firm/Company					
3860 LAMBERT AVENUE					
Address					
WEST PALM BEACH, FL 33405					
	WEST PALM BEACH, FL 33405 City/State and Zip Code ALICIA · BAUMILLER & GMAIL · COM E-mail address (to be used for future annual report notification)				
	concerning this matter, please call:				
ALIC	of Person Daytime Telephone Number				
Name	of Person Area Code Daytime Telephone Number				
Enclosed is a check for	the following amount:				
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee. Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)				

Mailing Address:

TO:

Registration Section

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

220 PLYMOUTH RD LLC

(A Florida Limited L		
The Articles of Organization for this Limited Liability Company Florida document number <u>L 24 0000 990</u> 64	were filed on <u>FE</u>	B 20, 2024 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Elmited Liabili	ty Company," the design	ation "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 a agent and/or the new registered office address here:	ddress on our recor	ds, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
-	Enter Florida si	reet address
		Florida
	Сиу	Zīp Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my (rovided for in Chap	luties, and I am familiar with and ter 605, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

2024 FEB 27 PH 4: 21

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>Address</u> **Type of Action** ALICIA G. BAUMILLER 3860 LAMBERT AVE XXIII WEST PALM BCH, FL 3340S ____ □Change V.PRES ALICIA G. BAUMILIER 3860 LAMERTAVE
WEST PALM BCH, FL 3340S □Change □Add □Remove __ □Change □Add □Remove ☐Change __ □Add □Remove □ Change □Add := Fr □ Remove □Changé E

ALICIA G. BAUMILLER
SIDENT
ALICIA G. BAUMILLER
PRESIDENT.

E. Effective date, if other than the date of filing:

(If an effective 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 (3kb)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated 02 23 2024 FEB23, 202

Signature of a member or authorized representative of a member

ALICIA G. BAUMILLER

Typed or printed name of signee

24 FEB 27 PH

Filing Fee: \$25.00