## L24000090705

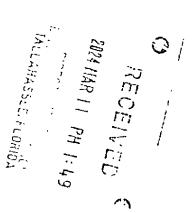
(	Requestor's Name)
(	(Address)
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	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(	Business Entity Name)
(	Document Number)
Certified Copies	Certificates of Status
Special Instructions to F	Filing Officer:
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## FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

03/11/2024

NAME: STRETCH FL 16 LLC

TYPE OF FILING: AMENDMENT

COST:

25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

## **COVER LETTER**

TO: Registration S Division of Co						
elin mem	Street shall IA IIC					
SUBJECT:	Stretch FL 16, LLC 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:				
	Melissa Childers					
		Name of Person				
	Maynard Nexsen	PC				
		Firm/Company				
	1901 Sixth Avenu	ae North, Suite 1700				
	Birmingham, AL	Address				
	miningham, At					
	mchilders@mayr	City/State and Zip Code	· · · ·			
	•	to be used for future annual report not	ification)			
For further information	concerning this matter, please c	all:				
Melissa Childers		at ( 205 ) 488-3612				
Name (	of Person	Area Code Daytin	ne Telephone Number			
Enclosed is a check for t	he following amount:					
$\overline{\chi}$ \$25.00 Filing Fee	☐ \$30.00 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)			
<u>Mailing Addre</u> Registration		<u>Street Address:</u> Registration Se	ection			
Division of C	Corporations	Division of Corporations				
P.O. Box 63. Tallahassee,		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

FILED

Stretch FL 16, LLC  (Name of the Limited Liability Company as it now andears on our records.)  (A Florida Limited Liability Company)  TALLAHASSEE, FLORIDA  The Articles of Organization for this Limited Liability Company were filed on February 21, 2024 and assigned  Florida document number L24000090705  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, if applicable:
The Articles of Organization for this Limited Liability Company were filed on February 21, 2024 and assigned Florida document number L24000090705  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:
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(Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:
Enter new mailing address, if applicable:
**
**
**
/M_:C J.L WAY DE A DOCT AFFICE DAVI
(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: BHW Stretch Operations, Inc.
Name of New Registered Agent:  Brity Stretch Operations, Inc.
New Registered Office Address:  Enter Florida street address
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.

IT 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>	Address	Type of Action
AP	Peter W. Williams, Jr.		□Add
			[XRemove
			☐ Change
MGR	BHW Stretch Operations, Inc.		MAdd
		Miami Beach, FL 33139	□Remove
		<del></del>	Change
			□Add
			□Remove
			□Change
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Filing Fee: \$25.00