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ALL BEASSELL FLORIDA

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- TO: Registration Section

Division of Corporations

Tallahassee, FL 32314

LM PROPI SUBJECT:	ERTY I LLC				
SUBJECT:	Name of Lin	nited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	LUIS A MESA				
		Name of Person			
	LM PROPERTY I LLC				
		Firm/Company	· · ·		
	204 191st ST				
	-	Address			
	Sunny Isles Beach , Florid	a 33160			
		City/State and Zip Code			
	mary@natsaccounting.com				
	E-mail address: (to be used for future annual report noti	fication)		
For further information c	oncerning this matter, please c	all:			
Mary Perea		305 222-1280 at ()			
Name o	f Person	Area Code Daytim	e Telephone Number		
Enclosed is a check for the	ne following amount:				
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Address		Street Address:			
Registration S Division of C		Registration Section Division of Corporations			
P.O. Box 632	-	The Centre of T	-		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Co	mnany as it now appears on our record	15.)
(A Florida Limi	ted Liability Company)	<u> </u>
	any were filed on 02/26/2024	and assigned
Plorida document number L24000096848		
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 " 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)		
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 "LLC 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)		
The new name must be distinguishable and contain the words "Limited I	iability Company," the designation "LLC	" or the abbreviation "L.1C."
Enter new principal offices address, if applicable:		· · · · · · · · · · · · · · · · · · ·
Principal office address MUST BE A STREET ADDRESS	0	
		- ·
		TAN MAN
Enter new mailing address, if applicable:		
• • •		
Muning dudiess MAI BEAT OUT OF THE DOWN		
0 4 0	ice address on our records, <u>enter</u>	,
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addre	255
	r	lorida
	City , r	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
AMBR	The Luis Mesa Family Trust	204 191st ST	□ Add
		Sunny Isles Beach, Florida 33160	≣Remove
			Change
AMBR	LUIS MESA	204 191st ST	■Add
		Sunny Isles Beach, Florida 33160	Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
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			□Remove
			□ Change

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i an effe <u>Note:</u>	ive date, if oth ective date is liste If the date inser- ent's effective of	d, the date must ted in this blo	be specific an ck does not i	d cannot be price meet the appli	or to date of filin cable statutory	g or more than 90	days after filin	l) g.) Pursuant to 60; e will not be list	5,0207 : sed as t
recore d is fil		ayed effective	date, but no	t an effective	time, at 12:01	a.m. on the ear	lier of: (b)	The 90th day afte	er the
Dated _.	May 1st			2024	·				
	11/00								
	- \$7		Signature of a	member or aut	horized represer	ntative of a mem	ber		