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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCFILE.COM LLC Account Number : I20220000070 Phone : (888)462-3453 Fax Number : (877)919-2613

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:	EFILE1234@INCFILE.COM
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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN XA CREATIVE SOLUTIONS LLC

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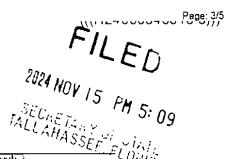
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## **COVER LETTER**

TO: Registration Se Division of Cor					
	TIVE SOLUTIONS LLC				
SUBJECT:	Name of Lin	nited Liability Company			
The enclosed Articles of	Amendment and fec(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	LOVETTE DOBSON				
	·	Name of Person			
	<u> </u>	Firm/Company			
	17350 STATE HWY 249	STE 220			
	PESOLUTIONS LLC  Name of Limited Liability Company  Incompany  Incompany  ILOVETTE DOBSON  Name of Person  Firm/Company  17350 STATE HWY 249 STE 220  Address  HOUSTON, TX 77064  City/State and Ztp Code  EFILE 1234@INCFILE.COM  F-mail address: tio be used for future annual report notification)  Perning this matter, please call:  at (1)  Area Code  Daytime Telephone Number  Following amount:  Street Address:  Registration Section  Street Address:  Registration Section				
	HOUSTON, TX 77064				
	EFILE 1234@INCFILE.CO				
	F-mail address; (	to be used for future airmial repe	ort notification)		
For further information c	oncerning this matter, please c	all:			
LOVETTE DOBSON		a1 ( )	888-462-3453		
Name o	f Person	Area Code I	Daytime Telephone Number		
Enclosed is a check for the	ne following amount:				
■ \$25,00 Filing Fee	S30,00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy		
<u>Mailing Addres</u> Registration S					
Division of C	orporations	Division of Corporations			
P.O. Box 632 Tallahassee, 1			e of Tallahassee Ionroe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



XA CREATIVE SOLUTIONS LLC

The Articles of Organization for this Limited Liability Company Florida document number 1.24000099881	y were filed on 02/26/2024 and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	1150 Nw 72nd Ave Tower 1 Ste 455 #18256	
• •	Miami, FL 33126	
Enter new mailing address, if applicable:	1150 Nw 72nd Ave Tower 1 Ste 455 #18256	
(Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 33126	
ψ ψ ψ ψ ψ ψ ψ ψ ψ ψ ψ ψ ψ ψ ψ ψ ψ ψ ψ	address on our records, enter the name of the new registere	
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address:	Enter Florida street address	
New Registered Office Address:	, Florida	
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 Florada street address  Enter Florada street address		
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as	Florida  City  Zip Code  in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is	

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Melanic Wilpon	1150 Nw 72nd Ave Tower 1 Ste 455 #18256	□Add
		Miami, FL 33126	□Remove
			<b>≅</b> Change
AMBR	Brian M Wilpon	1150 Nw 72nd Ave Tower 1 Ste 455 #18256	Sw 72nd Ave Tower 1 Ste 455 #18256  □ Remove  □ Change  □ Change □ Change □ Change □ Add □ Remove □ Change □ Change □ Add □ Remove □ Change □ Add □ Change
	Melanie Wilpon  1150 Nw 72nd Ave Tower 1 Ste 455 #18256  □ Remove  □ Change  □ Change		
			Change
			□Add
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ffective date, if other than the date effective date is listed, the date must fote: If the date inserted in this blococument's effective date on the Dep	se specific and ik does not n	cannot be prior neer the applica	to date of filing able statutory	or more than 90 d	(optional) ays after filing.) ents, this date	Pursuant to 605.0 will not be listed	)207 1 as
record specifies a delayed effective Lis filed.	date, but not	an effective til	me, at 12:01 a	.m. on the earlie	er of: (b) The	e 90th day after	the
October 16		2024					
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