L24000105080

(1	Requestor's Name)	
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((City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
——————————————————————————————————————	Business Entity Name)	
(1	Business Entity (48iffe)	
(1	Document Number)	-
Certified Copies	Certificates of	Status
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DIRECTIONS OFFICE DIVISION OF CORPORATION OF CORPORATION OF TALLAHASSEE, FLORIDA &

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RECEIVE

COVER LETTER

	Registration Se Division of Cor		ى و	
		E ST. PETE LLC	.	•
SUBJEC	Т:	Name of Lim	ited Liability Company	
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please ret	um all correspon	ndence concerning this matter	to the following:	
		JESSE BATTLE IV		
			Name of Person	
			Firm/Company	
		1910 MONTANA AVE N	E	
			Address	
		ST. PETERSBURG, FL 3	3703	
		JESSEBBATTLE@GMAII	City/State and Zip Code L.COM	
			to be used for future annual report notific	ation)
For furthe	r information c	oncerning this matter, please c	all:	
JESSE B	ATTLE IV		727 487-3200 at ()	
	Name of	f Person	Area Code Daytime I	elephone Number
Enclosed	is a check for th	e following amount:		
≡ \$ 25.0	0 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 Addres Registration S		Street Address; Registration Sect	ion
		-	2.7.	4*

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

RENOVATE ST. PETE LLC		2024 MAR 22 PM 12: 48
(Name of the Limited)	lability Company as it now appears on our r Florida Limited Liability Company)	ecords.)
The Articles of Organization for this Limited Liabi Florida document number L24000105080	· -	TALLAHASSEE, FLORIDA and assigned
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of th	e limited liability company here:	
The new name must be distinguishable and contain the words	s "Limited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicabl	e:	
(Principal office address MUST BE A STREET A	IDDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	
}		
B. If amending the registered agent and/or registered agent and/or the new registered office address h		nter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street o	address
		. Florida
-	City	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>	Name	Address	Type of Action
AMBR	JESSE BATTLE IV	1910 Montana Ave NE, St. Petersburg, FL 33703	= Add
			□Remove
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ffective date, if other than to smeffective date is listed, the date in this ocument's effective date on the	the date of filing: must be specific and can block does not mee	mot be prior to date t the applicable st	of filing or more the atutory filing requ	(options n 90 days after fili irements, this da	ng.) Pursuant to	o 605.020 e listed a
record specifies a delayed effec I is filed.	tive date, but not an	effective time, at	12:01 a.m. on the	earlier of: (b)	The 90th day	after the
		2024				
eated	, -					
03/21	Month	HOTE	epresentative of a n			_