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(Requestor's Name) (Address) (Address)	000433032880
(City/State/Zip/Phone #)	07/15/2401037003 **30.00
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	
Office Use Only	

COVER LETTER

TO: Registration Section Division of Corporations

Washington Designs and Estates LLC

SUBJECT: _

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Theodore Washington

Name of Person

Washington Designs and Estates

Firm:Company

140 Lincoln Boulevard

Address

Orlando, Florida 32810

City/State and Zip Code

twashing14@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee

E \$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)

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address:</u> 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

Washington Designs and Estates I			
(<u>Name of the Lim</u>	ited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited I Florida document number <u>L24000218106</u>	Liability Company	y were filed on	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited lial	bility company here:	
N/A			
The new name must be distinguishable and contain the	words "Limited Liab	ility Company," the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		140 Lincoln Blvd, Orlando, Florida 3	32810
(Principal office address MUST BE A STRE.	<u>ET ADDRESS)</u>		
Enter new mailing address, if applicable:		140 Lincoln Blvd, Orlando, Florida .	32810
(Mailing address MAY BE A POST OFFICE	E BON)		
B. If amending the registered agent and/or agent and/or the new registered office addre	· ·	address on our records, <u>enter the n</u>	ame of the new registered
Name of New Registered Agent:	Theodore E W	ashington III	<u> </u>
New Registered Office Address:	140 Lincoln B	livd.	<u></u>
<u> </u>	<u> </u>	Enter Florida street address	
	Orlando	, Florida	32816:7
		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.

It Charging 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

<u>Title</u>	Name	Address	<u>Type of Action</u>
MGR	Theodore Washington	140 Lincoln Blvd. Orlando Florida 32810	■Add
			Remove
			□Change
			🗆 Add
			🗆 Remove
			□Change
			🗆 Add
			🗆 Remove
		<u> </u>	🗆 Add
			🗆 Remove
			Change
			🗆 Add
		🗆 Remove	
			□Change
			🗆 Add
			🗆 Remove
			[]Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Remove all other names and addresses in Article V.

	·· <u> </u>
- <u>,</u>	

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.

July 8th	2024
,	VIII. L
	Signature of a member or authorized representative of a member
	Signadie of a mention of addition of representative of a mention
Theo	dore Washington

Typed or printed name of signee