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(((H24000216057 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

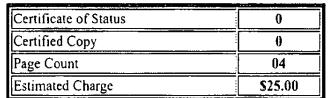
Account Name : J&K ACCOUNTING SERVICES LLC

Account Number : I20200000194 Phone : (786)448-3851 Fax Number : (123)456-789

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

Email	Address:	 	_	

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 212/214 SINGER STREET LLC



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Corporate Filing Menu

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K. SALY

JUN 2 4 2024

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

un 21, 2024 14:36 (0TC-04)	2024 14:36 (CTC-04) From: +17865502825 (Juan Antonio Contino) To: +18506176			
	ARTICLES OF	FAMENDMENT	H24000216057 3	
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	ARTICLES OF	ORGANIZATION	ile,	
•	(	OF	450 M	$\langle \chi \rangle$
			400	
212 214 SINGER		····	- 18 m	'ų,
•	(Name of the Limited Liability Com- (A Floridaimited	pany as it now appears on our re I Liability Company)	cords.)	۶. ۲
P			365	G
The Articles of Organization fo	or this Limited Liability Compar	y were filed on 05/22/2024	and assigned	,
Florida document number L24	000238222			
This are notified in an investigation	o man and the College of a sec			
This amendment is submitted t	o ameno the following:			
A. If amending name, enter	the new name of the limited lia	bility company here:		
-				
The new name must be distinguishab	ole and contain the words "Limited Lis	hility Company "the designation t	"I I C" or the abbreviation "I I C"	<u>-</u>
		many company: me acorganical	BEC VI HE WITE MINN, E.E.O.	
Enter new principal offices a	ddress, if applicable:	<del></del>		-
(Principal office address MUS	ST BE A STREET ADDRESS)			_
		***************************************	· · · · · · · · · · · · · · · · · · ·	<del>-</del>
<u>X</u> <u>12</u>				
Enter new mailing address, i	f applicable:			
(Mailing address MAY BE A)	POST OFFICE BOX)			_
1	<del></del>			
t .				<del>-</del>
B. If amending the registered	d agent and/or registered offic	e address on our records, <u>e</u> c	nter the name of the new regist	<u>ered</u>
agent and/or the new register	red office address here:			
Name of New Regist	e <u>red Agent:</u>			_
New Registered Office	ce Address:	Enter Florida street a	ddruss	<del></del>
		****** 1 1 117 1145 17 LL C	<del></del>	
		Cla	, Florida	<del>-</del>
		Cin·	AID COAP	

New Registered Agent's Signature, it 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 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	FERNANDO CHAVES	7500 NW 25TH STREET STE 109	<b>≝</b> Add
		MIAMI FL 33122	□ Remove
			□Change
			JAdd
			AiChange
			JAdd  Add  Reasove  AiChange  AiChange
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Filing Fee: \$25.00