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## **COVER LETTER**

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SUBJECT: 5	902 Saint E	lmo Street LLC				
			nited Liability Comp	oany		
The enclosed A	anicles of A	mendment and fee(s) are sub	omitted for filing.			
Please return al	ll correspone	dence concerning this matter	to the following:			
		Douglas Goldin				
			Name of Pe	rson		
		Goldin Law PA				
			Firm/Comp	any	<del></del>	<u>.                                      </u>
		PO Box 1451				
			Address			
		Gulf Breeze, FL 32562-14	.51			
		Odii Biedze, i B 32302 i v	City/State and Z	ip Code		
		douglas@goldinlaw.com	·	•		
		E-mail address: (	to be used for future	annual report	notification)	<del></del>
For further info	rmation con	cerning this matter, please co	all:			
Douglas Goldi	n		at ( 850	<sub>)</sub> 213-649	0	
	Name of P	erson	Area Ce	ode Da	ytime Telepho	ne Number
Enclosed is a cl	neck for the	following amount:				
<b>■ \$25.00</b> Fili	ng Fec	\$30.00 Filing Fee & Certificate of Status	S55.00 Filis Certified C (additional co	_		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	ig Address: stration Se	ction		treet Address egistration		
_	ion of Cor			ivision of		ns
P.O. 1	Box 6327		Т	he Centre o	of Tallahas	see
Tallal	hassee, FL	. 32314	2	415 N. Moi	nroe Street	, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

5902 Saint Elmo Street Pensacola, FL 325		
( <u>Name of the Limited Liah</u> (A Flor	bility Company as it now appears on our records. rida Limited Liability Company)	.)
The Articles of Organization for this Limited Liability	Company were filed on June 18, 2024	and assigned
Florida document number L24000276672	<del></del> ·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and contain the words "L	.imited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		- <del>-</del>
(Principal office address MUST BE A STREET ADL	DRESS)	( )
The state of the s		٦٠
		32
P		· 5
Enter new mailing address, if applicable:		<u></u>
(Mailing address MAY BE A POST OFFICE BOX)	,	···
	and the second s	
B. If amending the registered agent and/or register agent and/or the new registered office address here		he name of the new regis
		he name of the new regis
		he name of the new regis
Name of New Registered Agent:		he name of the new regis
agent and/or the new registered office address here		
Name of New Registered Agent:	Enter Florida street address	

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>	Name	Address	Type of Action
MG	Alan J. Macks	211 Tonawanda Drive	≘Add
	Pensacola, FL 32506	□ Remove	
			□Change
MG Alan J. Mack	211 Tonawanda Drive	□Add	
	Pensacola, FL 32506	<b>■</b> Remove	
		<del></del>	□Add
			□ Remove
			☐ Change
		<del></del>	
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Note:	ive date, if other than the date of filing:
ne recor ord is fi	d 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 ed.
Dated	July 29 , 2024 .
	· ·
	Signature of a member or authorized rapresentative of a member

Filing Fee: \$25.00