L240002945a3

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
J. HORNE UEC 18 2024
UEC 18 AUCH
Office Use Only



400439816674

11/20/24--01011--011 ++25.00



COVER LETTER

Registration Section Division of Corporations

TO:

Organizen. SUBJECT:	LLC			
SUBJECT.	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Raquel A Becher			
	Name of Person			
	Organizen, LLC			
		Firm/Company	· · · · · · · · · · · · · · · · · · ·	
	3350 NE 192 Street, Apt I	3-1C		
	Address			
	Aventura, FL 33180			
		City/State and Zip Code		
	hello@organizenspaces.com	m		
	E-mail address: (to be used for future annual report not	ification)	
For further information c	concerning this matter, please c	all:		
Raquel Becher		786 3022151 at ()		
Name o	f Person		ne Telephone Number	
Enclosed is a check for the	he following amount:			
■ \$25.00 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	.c.	Street Address:		
Registration :		Registration Section		
Division of C	-	Division of Corporations		
P.O. Box 632		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		
Tallahassee,	FL 32314	Tallahassee, FL 32303		

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

ARTICLES OF O	RGANIZATION
Ol	RGANIZATION F 2024 NOV 20 PM (ability Company)
	1NOV 20
Organizen, LLC	Py
(Name of the Limited Liability Compa- (A Florida Limited L	ny as it now appears on our records.) liability Company)
The Articles of Organization for this Limited Liability Company	were filed on and assigned
Florida document number 1.24000294523	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	ility company here:
• /	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."
	3350 NE 192 Street
Enter new principal offices address, if applicable:	Apt B-1C
(Principal office address MUST BE A STREET ADDRESS)	Aventura, FL 33180
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	en e
B. If amending the registered agent and/or registered office a	address on our records, <u>enter the name of the new registered</u>
agent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	<u> </u>
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is

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
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Add
			□ Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change

D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	· · · · · · · · · · · · · · · · · · ·
Note:	tive date, if other than the date of filing:
If the reco	rd 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 iled.
Dated	November I 2024
	Signature of a member or authorized representative of a member
	Raquel Becher

Typed or printed name of signee