## L24000340629

(Re	equestor's Name)	
(Ad	idress)	· · · · · · · · · · · · · · · · · · ·
(Ad	idress)	<u> </u>
(Cit	ty/State/Zip/Phone	e #)
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(Do	ocument Number)	
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## **COVER LETTER**

	of Corporations				
	a Immaculata, LLC				
SUBJECT:	Name of Lin	ited Liability Company			
The enclosed Arti-	cles of Amendment and fee(s) are sub	omitted for filing.			
Please return all co	orrespondence concerning this matter	to the following:			
	James Woodley				
		Name of Person			
	Investment Property Exch	ange Services, Inc.			
Firm/Company					
10 S La Salle St Ste 3100					
		Address			
	City/State and Zip Code				
	james.woodley@ipx1031.c				
		(to be used for future annual report notification)			
For further inform	nation concerning this matter, please of	rall:			
James Woodley		480 349-6061 at ()			
-	Name of Person	at () Area Code Daytime Telephone Number			
Enclosed is a chec	ck for the following amount:				
■ \$25.00 Filing	Fee Solution Status  See Solution Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
Registr Divisio P.O. Bo	Address: ration Section on of Corporations ox 6327 assee. FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 72 72 73 74 75 75 75 75 75 75 75 75 75 75 75 75 75			

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		culata, LLC		
(Name of the Lin	iited Liability Compa (A Florida Limited I	iv as it now appear iability Company)	s on our records.)	
The Articles of Organization for this Limited Florida document number L24000340629	Liability Company	were filed on Au	gust 02, 2024	and assigned
This amendment is submitted to amend the following	llowing:			
A. If amending name, enter the new name	of the limited liabi	lity company he	re:	
The new name must be distinguishable and contain the	words "Limited Liabili	ty Company," the de	signation "LLC" or the abl	previation "L.L.C."
Enter new principal offices address, if appli	cable:			
(Principal office address MUST BE A STRE	ET ADDRESS)			
_				
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	(BOX)	<del></del>		
			····	
B. If amending the registered agent and/or	registered office w	ldroce on our no		-C-1
agent and/or the new registered office addre	ess here:	idi ess on our rei	torus, emer the name	of the new registered
Name of New Registered Agent:	Francis J Benishe	:heck		
New Registered Office Address:				
	Enter Florida street a			
			Florida	
Now During and American Commence (C. )	<b>.</b>	Ciţy		Zip Code
New Registered Agent's Signature, if changing				
I hereby accept the appointment as registered provisions of all statutes relative to the propaccept the obligations of my position as reginal filed to merely reflect a change in the company has been notified in writing of this	per and complete pristered agent as princed agent as princed office a change.	erformance of n ovided for in Ch ddress, I hereby	ny duties, and I am fa papter 605, F.S. Or, ij confirm that the limi	miliar with and Lihis document₌is— Ted liability 20
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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	Francis J Benishcheck		□Add
			□Remove
			<b>=</b> Change
			□ Add
			□Remove
			□Change
			□Add
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effective date is listed, the date mue:  1 If the date inserted in this b	ist be specific and cannot be j	prior to date of filing or n	iore than 90 days after fil	ing. Harsum to 60	)5.020 sted.:
ument's effective date on the I			ig requirements, this o	AUG	1
				320	
cord specifies a delayed effecti	ve date, but not an effecti	ve time, at 12:01 a.m.	on the earlier of: (b)		ier th
filed.				The 90th day aft 1 2: 08 1 STAT	
Angust 13	2024			2: 08 STATE E, FL	
August 13	·	· ·		mi as	
Do L	odley Signature of a member or				
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	671.1.1.1.1				
- John su	Signature of a member or	authorized representative	e of a member		

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