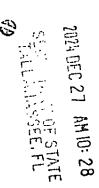
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

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20 027 At 9:08

FLORIDA CAPITAL COURIER SERVICES, INC 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-54372 (850) 524-6243

Please use funds from the account Authorization Signature 1012 W Jefferson ST LLC Business	unt <u>120210000160: \$25.00</u> ———————————————————————————————————
Walk in	Will wait
Certified Copies of the A Certificate of Status	rticles of Organization
NEW FILINGS	<u>AMENDMENTS</u>
Profit Not for Profit LLC Domestication INC CORP OTHER	_X AmendmentResignation of R.A Change of Registered Agent Dissolution/Withdrawal Conversion Statement of Authority Merger Amended and Restated Articles
OTHER FILINGS	REGISTRATION/QUALIFICATIONS
Annual Report	Foreign Filing
Fictitious Name	PartnershipReinstatementStatement of CORRECTION
Statement of Authority	Domestication of a Foreign Corp.
APOSTILCOUNTRY	Other
EXAMINER'S INITIALS:	

COVER LETTER

то:	Registration Se Division of Cor						
SUBJEC		FFERSON ST LLC					
SUBJEC	~1· <u></u>	Name of Lim	nited Liability Company				
		Amendment and fee(s) are sub	-				
		Patrick Lee					
			Name of Person				
		1012 W JEFFERSON ST	LLC				
			Firm/Company				
		111 N. Orange Ave Suite	111 N. Orange Ave Suite 800				
			Address				
		Orlando, FL 32801					
			City/State and Zip Code	·			
		tene@forwardboundsolutio					
For furth	er information c	n-mail address: (oncerning this matter, please c	to be used for future annual report notification) all:	2024 DEC 27			
Abena T	ene Williams		862 318-2422	21			
	Name o	f Person	Area Code Daytime Telephone	Number FE, FL			
Enclosed	l is a check for th	ne following amount:		- m -			
■ \$2 5.	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) C	60.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)			
	Mailing Addres Registration S		Street Address: Registration Section				

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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

1012 W JEFFERSON ST LLC		
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our records.) Jability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 08/27/2024	and assigned
Florida document number 1.24000375520		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		- 53
		2024
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	iddress on our records, <u>enter the</u>	name of the new register
agent and/or the new registered office address neve.		N C C
Name of New Registered Agent:		SSO = [17]
New Registered Office Address:		MIO:
	Enter Florida street address	ATE 27
	Floric	ła

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.

City

Zip Code

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	WILLIAMS, ABENA T	111 N ORANGE STREET, 800	
		ORLANDO, FL 32801	■Remove
			Change
MGR	WILLIAMS, HAILE A	111 N ORANGE STREET, 800	□Add
		ORLANDO, FL 32801	■Remove
			□Change
			DAdd
			□ Remove
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fective date, if other than the dan effective date is listed, the date must be	ate of filing:				_ (optional)	28	
n effective date is listed, the date must be telegible. If the date inserted in this block	e specific and c c does not me	cannot be prior the epitical	o date of filing ble statutory	or more than 90 filing requirem	days after filing. ients, this date) Pursuant will not !	to 605,0207 be listed as
cument's effective date on the Depa	artment of St	ate's records.					
ecord specifies a delayed effective d	ata but not a	m utfactive tin	vo at 12:01 a	m on the earl	iar of the Th	a OOth do	u aftar tha
is filed.	iate, out not a	in effective till	ic, at 12.01 a	in. on the eatt	iei oi, (b) Tii	e vom da	y after the
DECEMBER, 15 ted		2024					
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