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COVER LETTER

TO: Registration Section

Tallahassee, FL 32314

Division of Cor	porations		
SUBJECT:	Resture	ted Liability Company	n Shoppes, LLC
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Dani	Name of Person	<u></u>
		Firm/Company	
	<u>2013</u>	Redmark Un	
	Winter	<u> </u>	34787
	Owl ou	City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code	ication)
For further information c	oncerning this matter, please ca		,
DUNTEY Name o	CO 10 mto	at (407) 489 Area Code Daytime	-9070
Enclosed is a check for the	ne 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 Address Registration S	Section	Street Address: Registration Sec	
Division of C P.O. Box 632	•	Division of Cor The Centre of T	
	• •	The Control of 1	441 4 444 4 444 M W W

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Liability Company as it now appears on our rec (A Florida Limited Liability Company)	Unhous Shoppes u
	2/20 24 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation of the company of the	
	imi Or B
	Ke FSIGTES FL 32800 (Coloner Cross 3478
B. If amending the registered agent and/or registered office address on our records, entagent and/or the new registered office address here:	ter the name of the new registered
Name of New Registered Agent: Mirza Arsalo New Registered Office Address: 2023 Redmar	m Buig
Enter Florida street ado	lress
Winter Carden	Florida 34787 Zip Code

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.

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

Title Name **Address Type of Action** MbR Mirza A Brig 2023 Redmark Ln Radd Winter Garden, Fa Remove 34787 Change MGR Aince Ward 2023 Redmark Ly DAdd Winter (ourden, PL 3476) MGR Brittany Yersch 6500 Miami Dr Unit 1

Indian Lake Estates, Fr. 34787 MOR Rex Haynes 6500 Miumi Dr Unit 1
Indian whe Estates Fy 34 780 MGR Ann N Muhabb 650c Miumi Or unit)

Indian Lake Estats, Fry 34787 □Change ☐ Change

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an effecti [ote: If t	date, if other than the date of filing: 3-12-25 (optional) ve date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as 's effective date on the Department of State's records.
record spirection is filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated	March 12th 2025
	Signature of a member of authorized representative of a member
	Mirza A Baig