L24000499944

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	
	J. HORNE	
	FEB - 4 20)25

Office Use Only



900441137789

12/17/24--01028--002 ++25.00



COVER LETTER

3710 LLC SUBJECT: Name of Limited Liability Company			
The enclosed Articles of Amendment and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Robert M. Kesten, Esq.	•		
Name of Person			
Cohen, Norris, Wolmer, Ray, Telepman, Berkowitz and Cohen			
Firm/Company			
712 US Highway One, Suite 400			
Address			
North Palm Beach, FL 33408			
City/State and Zip Code			
CT@Cohennorris.com			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Robert M. Kesten, Esq. 561 844-3600 at ()			
Name of Person Area Code Daytime Telephone Number			
Enclosed is a check for the following amount:			
(additional copy is enclosed) Certified (e of Status &		
Mailing Address: Registration Section Street Address: Registration Section			
Division of Corporations Division of Corporations	Division of Corporations		
P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 81	0		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.)		
(A Florida Limited I	Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number L24000499944	were filed on 11/27/2024 and assigned		
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 Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	2126 NE River Court		
(Principal office address MUST BE A STREET ADDRESS)	Jensen Beach, FL 34947		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2126 NE River Court Jensen Beach, FL 34947		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name of the new register		
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	g~g · 1		
	Florida City Zip Code		

New Registered Agent's Signature, if changing Registered Agent:

3710 L L C

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 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>	<u>Address</u>	Type of Action
MGR	TYLER A. NICHOLS	2126 NE RIVER COURT	
		JENSEN BEACH, FL 34947	≡ Remove
			☐ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
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n effe <u>te:</u>	ective date is listed, the lifthe date inserted	than the date of ne date must be specif in this block does on the Departmen	fic and cannot be pri not meet the appl	licable statutory f	or more than 90 days	optional) after filing.) Pursuans this date will not	to 605.0207 be listed as
ecore		ed effective date, bi	it not an effective	time, at 12:01 a.	m, on the earlier o	of: (b) The 90th de	ny after the
ted _	December 13	RA	2024 ;	thorized consequent	hor read t	presontat	/- <u>\</u>
		. Signature	ANI a menioer or au	morizeu representa	inve of a member	•	

COHEN NORRIS WOLMER RAY TELEPMAN BERKOWITZ & COHEN 12/13/2024

Payee:

Department of State

Department of State

#O11125# #O67015656#

RMK/38079.008 filing fee

Amount:

Matter ID

TO THE

ORDER OF:

For

\$25.00

For: RMK/38079.008 filing fee

Request # 480465 Conflict: N By jm

Check # 11125

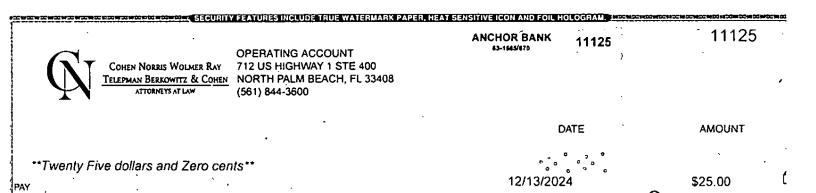
Matter Name

38079.00008

Purchase of 3710 Gardenia Avenue

Amount \$25.00

_0.00



VALID VALID

VALID VALID

20003034#

AUTHORIZED SIGNATURE