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(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:
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## Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 01/09/2025	_	<b>₩</b> WALK	[ <b>N</b> ≠
ENTITY NAME 2447	ARBUTUS DRIVE LLC		
DOCUMENT NUMBER			
	**PLEASE FILE THE	FATTACHED AND RETURN**	
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<del></del>	Certified Copy		
	Certificate of Status		
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	**APOSTILLE' / NO	OTARIAL CERTIFICATION**	
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NUMBER OF CERTIFICA	ATES REQUESTED		
TOTAL OWED \$25.00	)	ACCOUNT #: I20160000072	
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Please call Tina at	the above number for a	ny issues or concerns. Thank you so much!	

## **COVER LETTER**

TO:

Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

2447 ARBUTUS DRIVE 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: Jordan Chisolm Name of Person Cozen O'Connor Firm/Company Southeast Financial Center 200 South Biscayne Blvd, Suite 3000 Address Miami, FL 33131 City/State and Zip Code jkharrow@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Jordan Chisolm Name of Person Enclosed is a check for the following amount: ☐ \$60.00 Filing Fee, ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & **■** \$25.00 Filing Fee Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) Street Address: Mailing Address: Registration Section Registration Section **Division of Corporations Division of Corporations** 

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

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words "Limited Liabi		
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FT ADDRESS)	Delray Beach, FL 33-	146
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	address on our record	is, enter the name of the new register
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1 65 11		
Jenrey Harrow	<u> </u>	<u> </u>
16204 Andaluc	ia Lane	
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Delray Beach		, Florida 33446
	City	Zip Code
	ited Liability Compare (A Florida Limited Liability Company lowing:  of the limited liability cable:  ET ADDRESS)  registered office ess here:  Jeffrey Harrow	words "Limited Liability Company," the designal cable:  ET ADDRESS)  Tegistered office address on our recorders here:  Jeffrey Harrow  16204 Andalucia Lane  Enter Florida str

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.

Jeffrey Harrow
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>	<u>Name</u>	Address	Type of Action
AMBR	Amy Harrow	16204 Andalucia Lane, Delray Beach, FL 33446	<b>=</b> Add
			□Remove
			□Change
AMBR	Jeffrey Harrow	16204 Andalucia Lane, Delray Beach, FL 33446	🗆 Add
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<u>łote:</u> I	we date, if other than the ctive date is listed, the date must the date inserted in this blent's effective date on the De	ock does not meet	the applicable	ate of filing or morest statutory filing	e than 90 days afte	onal) r filing.) Pursuant to is date will not be	605.020 listed a
record Lis file	l specifies a delayed effectived.	e date, but not an o	effective time,	at 12:01 a.m. or	the earlier of: (I	o) The 90th day	after the
ated _	January 9th	. 20	025				
	Jeffrey_Has	Signature of a mem	ber or authorize	ed representative o	f a member	<del></del>	_

E::: E 635.00