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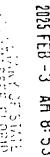
(Requestor's Name)
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(Document Number)
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COVER LETTER

TO: Registration Sectorial Division of Corp		2	
SUBJECT:	Stonebrick Name of Limit	ted Liability Company	· ·
The enclosed Articles of A	mendment and fee(s) are subn	nitted for filing.	
Please return all correspon	dence concerning this matter to	o the following:	
	Etha	Name of Person	
		Firm/Company	
	15 SE. 2r	Address	
		City/State and Zip Code City/State and Zip Code Code	
For further information co	ncerning this matter, please cal		(Cation)
Apigeril A Name of	Manning Person	at (SOO) Baytime Area Code Daytime	375 - 2453 Telephone Number
Enclosed is a check for the	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)
			,•1

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

2025 FEB -3 AM 8: 53

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

8 Stoneb	rick Drive LLC
	iability Company as it now appears on our records.) Florida Limited Liability Company)
The Articles of Organization for this Limited Liabil	lity Company were filed on <u>January</u> 08,2025 and assigned
Florida document number <u>L.250000 [6993</u>	<u> </u>
This amendment is submitted to amend the following	ng:
A. If amending name, enter the new name of the	e limited liability company here:
The new name must be distinguishable and contain the words	s "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	e:
(Principal office address MUST BE A STREET A	ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO.	<u></u>
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, enter the name of the ne
	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
_	Florida
	City 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Aldeniz Han	26 SE. 2nd Ave. STE 680	
		Miami, FL 33(3)	A. Remove
			Change
AMBR	Ethan Han	25 SE. 2nd Ave. STE 660	Add
		Miami, FL 33131	∠ Remove
			Change
AMBL	Mixian Asset, LLC	200 W. 34m Ave., #977	Add
		Anchorage, ALL 9450	3 □ Remove
			Change
			Remove
			Change
			Add
			□ Remove
			Change 225
			— FEB
			□ Add +3
			0: 52 0: 121 0: 121 Change 2: 52

(If an effective 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 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.	- -			
(If an effective 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 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.	-			
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(b) The 90th day after the record is filed.	(If an ef <u>Note:</u> docum	fective 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 605.0 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed nent's effective date on the Department of State's records.	l as the	
Dated January 20. 2025.	(b) The	e 90th day after the record is filed.		
and the second of the second o		Signature of a member or authorized representative of a member	133	į
Typed or printed name of signce		Ethan Han Typed or printed name of signee	B-3 AM	

Filing Fee: \$25.00