

1121000008238

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

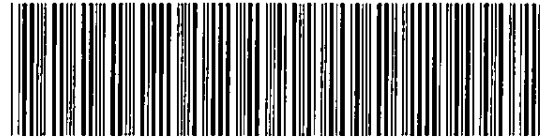
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000432335190

2024 AUG 30 PM 2:31

FILED

2024 AUG 27 PM 2:50

FILED

ALL AMBASSADOR FILINGS

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.incserv.com
e-mail: accounting@incserv.com



ORDER FORM

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Moreau
mmoreau@incserv.com
850.656.7953

REQUEST DATE 8/27/2024

PRIORITY Regular Approval

OUR REF # (Order ID#) 1280820

ORDER ENTITY
LIVWRK SOL WYNWOOD LLC

PLEASE PERFORM THE FOLLOWING SERVICES:
LIVWRK SOL WYNWOOD LLC (FL)

File the attached amendment and provide a certified copy.

NOTES:

\$55.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

A handwritten signature in black ink, appearing to be "W" followed by a stylized "O" or "B".

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 2400-2500 NORTH MIAMI LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ASHER ABEHSERA

Name of Person

LIVWRK

Firm/Company

55 PROSPECT STREET

Address

DUMBO, NEW YORK 11201

City/State and Zip Code

ASHER@LIVWRKCOM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ASHER ABEHSERA at (212) 531-4100
Name of Person Area Code & Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☒ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (I-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: FLVWRK SOL WYNWOOD LLC

Enter new principal office 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)

2. The Florida document number of this limited liability company is: M21000008278

3. Jurisdiction of its organization: DELAWARE

4. Date authorized to do business in Florida: 6/25/21

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: 2400-2500 NORTH MIAMI LLC
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C.," or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

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

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:

<u>Title/Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

9. Attached is a certificate, if required; no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

Signature of the authorized representative

ASHER ABELISERA

Typed or printed name of signee

Filing Fee: \$25.00

VIA FEDERAL EXPRESS

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monrow Street, Suite 810
Tallahassee, FL 32303
Attention: Russell L. Hunt

Re: 2400-2500 NORTH MIAMI LLC

Dear Mr. Hunt:

I, Asher Abehsera, am releasing the name "2400-2500 North Miami LLC" and document number M24000010996, effective immediately.

Sincerely,

Asher Abehsera

[ACKNOWLEDGEMENT ON FOLLOWING PAGE]

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID 'LIVWRK SOL WYNWOOD LLC' FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO '2400-2500 NORTH MIAMI LLC'. ON THE TWENTY-SIXTH DAY OF MAY, A.D. 2023, AT 11:46 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID '2400-2500 NORTH MIAMI LLC'. IS THE LAST KNOWN TITLE OF RECORD OF THE AFORESAID LIMITED LIABILITY COMPANY.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.



5928035 8321
SR# 20243501761

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read 'JBULLOCK', is written over a horizontal line. Below the line, the text 'Jeffrey W. Bullock, Secretary of State' is printed in a small font.

Authentication: 204733170
Date: 08-23-24