8/23/23, 5:34 PM Division of Corporations

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Account Name : AT PLUS CORP Account Number : I2014000000

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **MARINA OAKS 916 LLC**

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AUG 2 5 2023

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MARINA OAKS 916 LLC		
(Name of the Limited Liability Come (A Florida Limited	pany as it now appears on our records.) Liability Company)	·
The Articles of Organization for this Limited Liability Compan	y were filed on04/27/2011	and assigned
Florida document number L11000050002		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lis	bility company here:	
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
Mailing uddress MAY BE A POST OFFICE BOX)		

3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records, enter the na	me of the new regis
Name of New Registered Agent:	1	· .
New Registered Office Address:		7500
	Enter Florida street address	ed.
	, Florida _	')
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agen	<u>t:</u>	₹

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 familian 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>	Address	Type of Action
AMBR	MIGUEL ARTURO SOLIS	500 EGRET CIRCLE #8111	
		DELRAY BEACH FL 33444	□Remove
			CChange
			DAdd
			□Remove
			DChange
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<u>Note:</u> If th	le date inserte	d in this block do	es not mee	et the applica	to date of filin able statutory	g or more than y filing requi	90 days after frements, this	iling.) Pursuant to date will not be	o 605.0207 : listed as
locument'	s effective dat	e on the Departm	ent of Stat	te's records.					
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d is filed.	ecines a delay	ed effective date,	oui noi ar	a citective th	me, at 12:0:	a.m. on the	artier of: (b)	The 90th day	after the
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Dated		AUGUST 23	······································	2023	<u></u> •				
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