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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : VCORP SERVICES, LLC

Account Number : I20080000067 : (845)425-0077 Fax Number : (845)818-3588

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

		_	
Email	Address:		_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN STERLING PROPERTIES INVESTMENT GROUP, LLC

Certificate of Status	0
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T. LEMIEUX MAY 05 2023

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

STERLING PROPERTIES INVESTM					
(Name of the Limited I (A l	iability Company as it now appears on our rec Florida Limited Liability Company)	ords.)			
The Articles of Organization for this Limited Liabi			and a	ssigne	d
Florida document number 1.15000139137	·				
This amendment is submitted to amend the following	ng;				
A. If amending name, enter the new name of the	e limited liability company here:				
GREYSTONE CAPITAL CHARLOTTE, LLC					
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "L	.L.C" or the at	phieviation "	L.L.C."	
Enter new principal offices address, if applicable					-
(Principal office address MUST BE A STREET A	DDRESS)				
Enter new mailing address, if applicable:			·		
(Mailing address MAY BE A POST OFFICE BO.	<u>v</u>)				
D. F.C. P. of the state of the	400	`.	· .	20	
B. If amending the registered agent and/or regis agent and/or the new registered office address he	tered office address on our records, ent	er the nam	e of the ne		istere
The state of the s				TI.	
				1	
Name of New Registered Agent:					
New Registered Office Address:					(_
	Enter Florida street add	ress		छ	
		Florida	•	Ę.	
	City	/111213	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 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

Title	Name	Address	Type of Action
MGR	GREYSTONE CAPITAL, LLC	11035 GOLF LINKS DRIVE	≅Add
		#78602 	
		CHARLOTTE, NC 28277	
MGR	BOBBY ZACHARIAS	11035 GOLF LINKS DRIVE	
		#78602	
		CHARLOTTE, NC 28277	
			□Add
			□Remove
			□∧dd
			□Remove
			Change
			[]Add
			ClChange

			∐Chang e

<i>0 v</i>	mation, enter change(s) here: (Attach additional sheets, if necessary.)	

Note: If the date inserted in thi	the date of filing:	207 88
ne record specifies a delayed effe ord is filed.	ctive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after t	he
Dated	2023	
	Signature of a member or authorized representative of a member	
SCOTT A FRANK,	ESQ., DULY AUTHORIZED Typed or printed name of signee	