From: Jason Weisler

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H220002557213)))



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To:

Page, 1 of 4

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : WHITE/PETERMAN PROPERTIES, INC.

Account Number : I20210000047 : (219)757-3730 Phone : (219)680-4255 Fax Number

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

Email Address: smustafa@whitepeterman.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **AUDUBON 246, LLC**

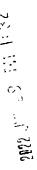
Certificate of Status	0
Certified Copy	0
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If Changing Registered Agent, Signature of New Registered Agent

From: Jason Weisler

Fax Audit Number H22000255721 3

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AUDUBON 246. L	J.C	
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records.) lability Company)	<del></del>
The Articles of Organization for this Limited Liability Company Florida document number	were tiled on08/12/2021	and assigned
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liabi	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil."	ity Company," the designation "LLC" or the ab	obreviation "L.L.C."
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)	Suite 205	
[Frincipal Office address #1031 BL A STREET ADDRESS]	Englewood, Florida 34224	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the nan	ne of the new registered
Name of New Registered Agent:  New Registered Office Address:	Enter Florida street address Florida	2022 JUL 29 SECRETARY LALLAMASSER
New Registered Agent's Signature, if changing Registered Agent:	City	Tap Coulty
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am provided for in Chapter 605, F.S. Or.	familiar with and if this document is

Page: 3 of 4

Fax Audit Number 1122000255721.3

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>	Name	<u>Address</u>	Type of Action
			□.Add
			Remove
			□Remove
			☐ Change
			□Add
			Петюче
			□Change
			□Add
			Remove
			□Add
			□Remove
			□Add
			□Remove

From: Jason Weisler

Fax Audit Number H22000255721 3

lf am	ending any other information, enter change(s) here: Attach additional sheets, if necessary.)
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(If an ef <u>Note:</u>	ive date, if other than the date of filing:
ord is ti	
Dated	Signature of a member or authorized representative of a member
	1 mil
	Signature of a member or authorized representative of a member
	Jason Weisler, Secretary of the Manager  Typed or printed name of signee