## L21000314258

(	(Requestor's Name)	
	(Address)	
(	(Address)	
(	(City/State/Zip/Phone #)	<del></del>
PICK-UP	☐ WAIT	MAIL
	Business Entity Name)	
(	Document Number)	-
Certified Copies	Certificates of	Status
Special Instructions	to Filing Officer:	
	J. HORNE	
	JUN 2 1 2022	

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2022 JUN 20 AM 11: 24

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee. FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

2 mono. 000 000 1000
ACCOUNT NO. : I2000000195
REFERENCE : 754855 7998853
AUTHORIZATION : Lovello of a real
COST LIMIT : (\$ 25.00
ORDER DATE : June 17, 2022
ORDER TIME : 9:38 AM
ORDER NO. : 754855-030
CUSTOMER NO: 7998853
DOMESTIC AMENDMENT FILING  NAME: UNIT UP-6 17555 COLLINS LLC
EFFECTIVE DATE:
ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING

EXAMINER'S INITIALS:

CONTACT PERSON: Alexxis Weiland -- EXT#

46

## **COVER LETTER**

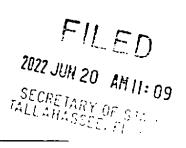
TO:

Registration Section

Division of Co	orporations		
	5 17555 Collins LLC		
SUBJECT:	Name of Lin	mited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.	
Please return all corresp	condence concerning this matte	r to the following:	
	Marc A. Benjamin		
		Name of Person	·
	Benjamin, Gussin & Asso	ociates	
		Firm/Company	
	801 Skokie Błvd., STE 10	00	
		Address	······································
	Northbrook, IL 60062		
	<del></del>	City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	kfrench@bgalawfirm.com		
	E-mail address:	to be used for future annual report no	tification)
For further information of	concerning this matter, please of	all:	
Marc A. Benjamin		847 861-6211 at ()	
Name o	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he following amount:		
S25.00 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)
Mailing Address Registration S		<u>Street Address:</u> Registration Se	ction
Division of Corporations		Division of Cor	rporations
P.O. Box 632 Tallahassee, I		The Centre of 7	Tallahassee e Street, Suite 810
t attanassee, 1	L 34317	Z413 IV. IVIONIO	e succi, suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Unit UP-6 17555 Collins LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company Florida document number <u>L21000374258</u>	were filed on August 19, 2021 and assigned				
This amendment is submitted to amend the following:					
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  The new name must be distinguishable and contain the words "Limited Liability 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]  Sunny Isles, FL 33160					
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."				
Enter new principal offices address, if applicable:	17555 Collins Avenue, #3901				
• • •	Sunny Isles, FL 33160				
Enter new mailing address, if applicable:	17555 Collins Avenue, #3901				
(Mailing address MAY BE A POST OFFICE BOX)	Sunny Isles, FL 33160				
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 name of the new registered				
Name of New Registered Agent:	<del></del>				
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
Manager Aaron Tiram	Aaron Tiram	17555 Collins Avenue, #3901	
		Sunny Isles, FL 33160	□ Remove
			E Change
			🗀 Add
			□Rетоvе
			□Change
			□Add
			□Remove
		<del></del>	
			□Add
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			□Remove
			Change
	<del></del>		
		<del></del>	Remove

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factive	date, if other than the date of filing:
in entect	Me date is listed. We date thirst be specific and campot be blint in trace or mank of more many to date trimit?) Largeant in cottons
ote: li cumen	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed at it's effective date on the Department of State's records.
ecord s	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
is filed	
	June 17 2022
ited	
	Deal New and
	Signature of a member pr authorized representative of a member
	- //
	• 1

Filing Fee: \$25.00