5/1/23, 1:29 PM

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.

((H23000162208.3h)



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet,

Division of Corporations
Fax Humber : (850)617-6383

From:

10:

Account Name : DECK, MARRIS, RAYMOR & JORES, P.A. Account Number : 120000000110

: (561)746 1002 : (561)775-027a Fai Yumber

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

Emil Address: janet@protocolbs.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 151 NORTH BEACH ROAD, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
listimated Charge	\$25,00

Electronic Filing Menu Corporate Filing Menu

Help

127 0 2 2023

< Brumbi≠y

Page: 11 of 21 05/01/2023 3:34 PM

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

151 North Beach Road, LLC		
(Name of the Limited Liability Com (A Florida Limited	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compan	ny were filed on <u>07/03/2007</u>	and assigned
Florida document number <u>L07000069821</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
Principal office address MUST BE A STREET ADDRESS) Inter new mailing address, if applicable:		
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	must be distinguishable and contain the words "Limited Ltability Company." the designation "LLC" or the abbreviation "L.L.C." rincipal offices address, if applicable: fice address MUST BE A STREET ADDRESS) pailing address, if applicable: ress MAY BE A POST OFFICE BOX)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/ay registered -65	a delicario de la constanti de la constanti della constanti de	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the na	me of the new registered
		ب - جو - ا
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	<u>:</u>	
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of my duties, and I an provided for in Chapter 608 F.S. O	n familiar with and raif this document is

If Changing Registered Agent, Signature of New Registered Agent

From: Bailey Kélel Fax: 15617132084

MGR = Manager

AMBR = Authorized Member

To.

Fax: (850) 617-6383 (((H23000162208 3)))

Page: 12 of 21

05/01/2023 3:34 PM

□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:

Title	Name	Address	Type of Action
			🗆 Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			DChange
			CiAdd
			🗆 Remove
			©Change
			CIAdd
		□Remove	
			□Change
			□Add
			□Remove

(((H23000162208 3)))

	-				
,		<u></u>			
			··		
			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
*					
+		 			
444					
					
		74.1			
					
		_			
	other than the date of isted, the date must be spec iscrted in this block does be date on the Departmen	S HOUSINGEL DIE AUG	micamie staniiory i	(option or more than 90 days after this this	inal) filing.) Pursuant to 605.0207 date will not be listed as
ecord specifies a is filed.	delayed effective date, b	ut not an effective	e time, at 12:01 a.	m. oπ the earlier of: (b)	The 90th day after the
	2/3	2023			
ted	~ (1) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	L .			
	Ohenh	لمر	sthorized representa		

(((H23000162208 3)))

Filing Fee: \$25.00