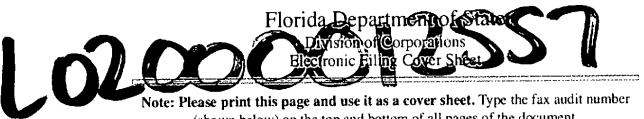
O 11/04/2020 8:00 AM Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 : (561)694-8107 Phone : (561)214-8442 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:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PALM BEACH OFFICE LLC

| Certificate of Status | 0 |
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| Certified Copy | 0 |
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Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

| PALM BEACH OFFICE LLC | | | | |
|---|---|------------------------------------|--|--|
| (Name of the Limited Liability Comp (A Florida Limited | pany as it now appears on our r I Liability Company) | ecords.) | | |
| The Articles of Organization for this Limited Liability Compan | y were filed on 05/22/2002 | and assigned | | |
| Florida document number L02000012557 | | | | |
| This amendment is submitted to amend the following: | | | | |
| A. If amending name, enter the new name of the limited lia | bility company here: | | | |
| Miramar Management LLC | | | | |
| The new name must be distinguishable and contain the words "Limited Liab | bility Company," the designation | "LLC" or the abbreviation "L.L.C." | | |
| Enter new principal offices address, if applicable: | | . 2 | | |
| (Principal office address MUST BE A STREET ADDRESS) | | 20 - 7 | | |
| | | § 7 | | |
| | | | | |
| Enter new mailing address, if applicable: | | <i>i</i> o = | | |
| (Muiling address MAY BE A POST OFFICE BOX) | | | | |
| | | ### 5 | | |
| B. If amending the registered agent and/or registered office agent and/or the new registered office address here: | e address on our records, g | nter the name of the new registere | | |
| Name of New Registered Agent: | | | | |
| New Registered Office Address: | Enter Florida street | -11 | | |
| | Enter Florida street (| r rionad street duaress | | |
| | City | , Florida | | |
| | • | гдр Спае | | |
| New Registered Agent's Signature, if changing Registered Agen | <u>11:</u> | re i de de | | |

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

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
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