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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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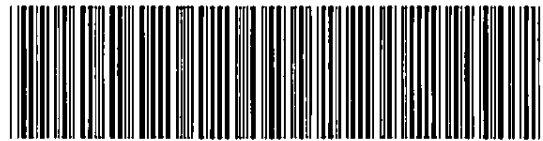
(Business Entity Name)

(Document Number)

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2024-7-7 PM 1:35

BELTZ & BELTZ

A Professional Association

July 26, 2024

VIA US MAIL WITH TRACKING

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Re: Our Client: Gerald "Jerry" Burns
Limited Liability Co: Harrison Street Associates, LLC
Document No: L02000021060

Dear Sir/Madam:

Enclosed please find Articles of Amendment for Harrison Street Associates, LLC for the following changes:

1. New principal office
2. New mailing address
3. New Registered Agent address
4. Removing and adding Managers for the LLC

Also enclosed is my firm's check #1280 in the amount of \$25.00 for the filing fee. Please process the amendments as indicated on the attached form. Should you have any questions, please do not hesitate to contact the undersigned.

Very truly yours,



Jennifer R. Beltz

Enclosures – as stated

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Harrison Street Associates, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gerald M. Burns

Name of Person

Firm/Company

335 9th Avenue South

Address

Safety Harbor, FL 34695

City/State and Zip Code

jmburns43@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gerald Burns

727 418-5236
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 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 Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

Harrison Street Associates, 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 were filed on August 16, 2002 and assigned Florida document number L02000021060.

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)

335 9th Avenue South

Safety Harbor, FL 34695

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

335 9th Avenue South

Safety Harbor, FL 34695

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

335 9th Avenue South

Enter Florida street address

Safety Harbor

Florida 34695

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Gerald Burns	335 9th Avenue South	<input type="checkbox"/> Add
		Safety Harbor, FL 34695	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Gerald Burns as Trustee	335 9th Avenue South	<input checked="" type="checkbox"/> Add
		Safety Harbor, FL 34695	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Add the following as a manager to the Harrison Street Associates, LLC:

Gerald M. Burns Revocable Trust Agreement Dated November 4, 1993 as Amended and Restated July 19, 2018

Address: 335 9th Avenue South, Safety Harbor, FL 34695


E. Effective date, if other than the date of filing: _____ **(optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated July 19, 2024



Signature of a member or authorized representative of a member

Gerald M. Burns

Typed or printed name of signee