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| Certified Copies | _ Certificates | of Status |
| Special Instructions to I | Filing Officer: | |
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Office Use Only





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Registration Section

Tallahassee, FL 32314

· TO:

| Division of Co | rporations | | |
|---|---|---|-----------------------|
| SUBJECT: Board | walk Shops, L.C., a | Florida limited liability company | |
| | Name of Lin | nited Liability Company | |
| | | | |
| The enclosed Articles o | f Amendment and fee(s) are sub | omitted for filing. | |
| Please return all corresp | ondence concerning this matter | to the following: | |
| | William J. Maguire | | |
| | | Name of Person | |
| | Maguire Law Chartered | | |
| | | Firm/Company | _ |
| | 400 Columbia Drive, Suite | e 100 | 2022 |
| | | Address | |
| | West Palm Beach, FL 334 | 09 | ZBZZ JUL 20 AM IQ: 23 |
| | | City/State and Zip Code | |
| | | onyouro and hip code | |
| | E-mail address: (| to be used for future annual report notification) | 10: 23 |
| For further information of | concerning this matter, please ca | all: | · |
| William J. Maguire | | 561 687-8100 | |
| Name o | of Person | at () | |
| Enclosed is a check for t | he following amount: | | |
| □ \$25.00 Filing Fee | S30.00 Filing Fee & Certificate of Status | (additional copy is enclosed) Certified | ate of Status & |
| Mailing Addres Registration 9 Division of C P.O. Box 632 | Section Corporations | 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

| Boardwalk Shops, L.C., a Flo | | | | | | |
|---|--|---|-------------------|--------------|---------------|--------|
| (Name of the Limite | d Liability Compa À Florida Limited I | iny as it now appears on our re Liability Company) | cords.) | | - | |
| | | | | | | |
| The Articles of Organization for this Limited Lia | юшту Сопрапу | were filed on | | _ and a | ssigned | |
| Florida document number L03000009788 | . <u>. </u> · | | | | | |
| This amendment is submitted to amend the follow | wing: | | | | | |
| A. If amending name, enter the new name of | the limited liab | ility company here: | | | | |
| The new name must be distinguishable and contain the wo | rds "Limited Liabii | lity Company," the designation " | LLC" or the abbre | viation ' | 'L,L.C." | |
| Enter new principal offices address, if applica | ble: | 91 SW 12th Ter. | | | | |
| (Principal office address MUST BE A STREET | T ADDRESS) | Boca Raton, FL 33486 | | | 2022 | _ |
| | | | | .7.53 | ~ | |
| | | | | <u>``</u> | = | |
| Enter new mailing address, if applicable: | | 91 SW 12th Ter. | | | 20 | Γ |
| (Mailing address MAY BE A POST OFFICE B | eoxo | Boca Raton, FL 33486 | <u> </u> | *: | <u>^</u> | TT |
| | | | | | <u> </u> | |
| | | | | _100 | $\frac{1}{2}$ | _ |
| B. If amending the registered agent and/or re | gistered office a | address on our records, en | ter the name o | of the n | | tere |
| agent and/or the new registered office address | here: | <u></u> | Ter cite italie | <u> </u> | CH TOEIS | ter et |
| | | | | | | |
| Name of New Registered Agent: | | | | | | |
| New Registered Office Address: | 91 SW 12th Ter | г. | | | | |
| | | Enter Florida street ad | dress | | | _ |
| | Boca Raton | _ | Florida 33486 | 5 | | |
| | | City | | Zip Cod | - | _ |

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.

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 |
|--------------|---------------|---------------------------|----------------|
| MGRM | Omar Shihadeh | 414 South Powerline Road | |
| | | Deerfield Beach, FL 33442 | ■Remove |
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| | 41 | Sign | ature of a me | ember or aut | horized repr | esentative of | a member | | | | |
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| | | , Authorized | | | | | | | | | |

Filing Fee: \$25.00