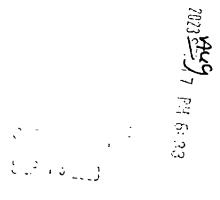


(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
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08/17/23--01006--020 **475.00



COVER LETTER

то:	Registrat Division o				84° 1°			
SPD IE		WEST HAMPTON WELLINGTON LLC						
SUBJEC	., I: <u> </u>		Name of Lim	ited Liability Company				
The encl	osed Artic	les of A	Amendment and fee(s) are sub	mitted for filling.				
Please re	rturn all co	errespon	idence concerning this matter	to the following:				
			ALBERTO CAMIII					
				Name of Person				
			WEST HAMPTON WELL	ANGTON LLC				
				Firm/Company				
	9800 E. BROADVIEW DRIVE							
		Address BAL HARBOUR, FL 33154						
				City State and Zip Code	· · · · - · · ·			
			E-mail address: (to be used for future annual report not	ification)			
For furth	ier informa	ation co	ncerning this matter, please c	all:				
ALBER	то самі	11		305 389-4353				
		Same of	Person	at () Area Code Daytin	ne Telephone Number			
Enclosed	f is a check	k for the	g following amount:					
■ \$25.	.00 Filing l	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 A Registra			Street Address:	ertion			
			orporations	Registration Se Division of Co				
	P.O. Box			The Centre of	•			

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WEST HAMPTON WELLINGTON LLC

(,	A Florida Limited	any as it now appears on our r Liability Company)	,		
The Articles of Organization for this Limited Lia	ibility Company	were filed on May 10, 20	05	and assigned	
Florida document number 1.05000046451	·				
This amendment is submitted to amend the follow	wing:				
A. If amending name, enter the new name of	the limited liab	pility company here:			
The new name must be distinguishable and contain the wo	rds "Limited Liabi	ility Company," the designation	"LLC" or the abbr	eviation "L.L.C."	
Enter new principal offices address, if applica	ble:	9800 E. Broadview Drive			
(Principal office address MUST BE A STREET	ADDRESS)	Bay Harbour, Florida 331	54	2023	
				<u>\\\\\</u>	
				2	
Enter new mailing address, if applicable:		9800 E. Broadview Drive		<u> </u>	
(Mailing address MAY BE A POST OFFICE B	3 <i>OX</i>)	Bay Harbour, Florida 331	54		
				<u> </u>	
B. If amending the registered agent and/or reagent and/or the new registered office address Name of New Registered Agent:	here:				
New Registered Office Address:	9800 E. Broadview Drive				
	Enter Florida street address				
	Bay Harbour F		Florida <u>3315</u>	orida <u>33154</u>	
		City		Zip Code	
New Registered Agent's Signature, if changing Re	egistered Agent:				
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as regist being filed to merely reflect a change in the recompany has been notified in writing of this company has	r and complete tered agent as p gistered office	performance of my dutic provided for in Chapter (rs, and Lam fai 305, F.S. Or, if	niliar with and this document is	
	hange.				

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>	Type of Action
MBR	MCA Residential Holdings LLC	9800 E. Broadview Drive	
		Bal Harbour, Florida 33154	□Remove
			□Change
PA	MCA Residential Holdings LLC	9800 E. Broadview Drive	
		Bal Harbour, Florida 33154	■ Remove
			□Change
President	MAX ALCALAY	5201 NW 77 Avenue	□Add
		Miami, Florida 33166	≅Remove
			□Change
Vice Pres	ALBERTO CAMHI	9800 E. Broadview Drive	□ Add
		Bal Harbour, Florida 33154	
		 	□Add
			Remove
			□Change
			□Add
			□Remove
			□(Change

The Compa	my shall be Member Managed. The member ma	naging the company is
MCA Resi	dential Holdings, LLC, a Florida limited liability	company, whose
post office	address is 9800 E. Broadview Drive, Bal Harbou	r. Florida 33154
<u> </u>		
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fective date, i	fother than the date of filing:	(optional)
n effective date i o <u>te:</u> If the date	listed, the date must be specific and cannot be prior to	date of filing or more than 90 days after filing.) Pursuant to 605.02 le statutory filing requirements, this date will not be listed
ecord specifies is filed.	a delayed effective date, but not an effective time	e, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ted	July 20 2023	·· ^
	$0 0 0 \dots 0$	

Filing Fee: \$25.00

Typed or printed name of signee