## 105000056412

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TALLAHASSEE, FL

## **COVER LETTER**

TO: Registration Se Division of Cor				
	EAL ESTATE HOLDING II, I	LLC		
SUBJECT:	Name of Limi	ited Liability Company	<del></del>	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Dominic DeCesare Esq.			
		Name of Person		
	Foster & Fuchs, P.A.			
		Firm/Company		
	4425 Military Trail, Suite	109		
		Address		
	Jupiter, FL 33458			
	ddecesare@fosterfuchs.com	City/State and Zip Code		
	•	to be used for future annual report notif	ication)	
For further information of	concerning this matter, please ca	all:		
Dominic DeCesare		561 799-6797		
Name	of Person		e Telephone Number	
Enclosed is a check for t	he 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 enclose	
<u>Mailing Addre</u> Registration		Street Address: Registration Sec	ction	
Division of O P.O. Box 633	Corporations	Division of Corporations The Centre of Tallahassee		
Tallahassee,		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BENJUL REAL ESTATE HOLDING II, LLC			
(Name of the Limited Liability Compa- (A Florida Limited L	ny as it now appears on or iability Company)	ur records.)	
The Articles of Organization for this Limited Liability Company  Florida document number L05000056412	were filed on <u>06/07/20</u>	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designat	tion "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		· · · · · · · · · · · · · · · ·	
(Principal office address MUST BE A STREET ADDRESS)			_
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our record	ls, <u>enter the name of the new regi</u>	itere
Name of New Registered Agent:			_
New Registered Office Address:	Enter Florida str	eet address	<b></b>
		, Florida	_
New Registered Agent's Signature, if changing Registered Agent:	City	Zip Code	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	ee to act in this capac performance of my d provided for in Chapt	luties, and I am familiar with and ter 605, F.S. Or, if this document	!

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 addor removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	Jabs Family Investments, LLC	156 Gulfstream Drive, Tequesta, FL 33469	🖶 Add
			□Remove
			□Add
			□Remove
			□Change
<del></del>			□Add
			MECRE
			MECRETANRY ADE STREETE
			□Change
	<del></del>		□Add
			□Remove
			Change
			CJAdd
			□Remove
			Change

	Signature of a me	mber or authoriz	ed representative of	a member	
	1				
Dated October 26		2022			
he record specifies a delayed effect ord is filed.	ive date, but not an	n effective time	, at 12:01 a.m. on	the earlier of: (b)	The 90th day after the
Effective date, if other than the (If an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	ust be specific and ca block does not mee	unnot be prior to et the applicabl			ling.) Pursuant to 605.0207
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Filing Fee: \$25.00