L05000082538

(Requestor's Name)		
(Address)		
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





200430584762

06/04/24--01040--015 **30.00

2024 JUN -4 PH 3: 37

Name Change

250

JUL 1 2 2024 D CUSHING

COVER LETTER

то:	Registration Se Division of Cor					
SUBJI		IOWCASE, L.L.C.	•			
3000		Name of Lim	ited Liability Company			
The en	closed Articles of .	Amendment and fee(s) are sub	mitted for filing.			
Please	return all correspo	ndence concerning this matter	to the following:			
		Philip W. Grosdidier				
			Name of Person			
		Fox McCluskey Bush Rob	ison, PLLC			
			Firm/Company			
		2300 SE Monterey Rd., St	nite 201			
			Address			
		Stuart, FL 34996				
		cmulrooney66@gmail.com	City/State and Zip Code		19.7	
		E-mail address: (to be used for future annual report notificati	on)		ereni i
For fur	ther information co	oncerning this matter, please c	all:	:	- 한생 - , 1 - :	
Philip	W. Grosdidier		772 287-4444 at ()) ;	1 4	
	Name of	f Person	Area Code Daytime Te	ephone Number	1 3: 37	l.
Enclos	ed is a check for th	e following amount:				
□ \$2	5.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of State Certified Copy (additional copy is encl		

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

NISAIR SHOWCASE, L.L.C.		
(Name of the Limited Liability Com (A Florida Limited	p <u>any as it now appears on our records.</u>) I Liability Company)	
The Articles of Organization for this Limited Liability Compar	y were filed on August 22, 2005	and assigned
Florida document number L05000082538		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
Showcase Downtown, LLC		
he new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		202
		-L"
		ementers of the contracts
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		3 5
		i ·1
 If amending the registered agent and/or registered office gent and/or the new registered office address here: 	e address on our records, <u>enter th</u>	e name of the new register
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flor	
	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>	Name	<u>Address</u>	Type of Action
			□Add
			□Change
			□Remove
			□Change
			□Add
			□Remove
		<u> </u>	□Change
			□Add
			□Remove
			□Change
		 -	□Add
			Remove
			□Change
			□ Add
			□Remove
			□Chanca

·	
	
•	
	
	
(If an effective date is listed, the date r	the date of filing:
the record specifies a delayed effectord is filed.	tive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated May 30	2024
7	
	Control of the second s
,	Signature of a member or authorized representative of a member
Philip W. Grosdidier	Authorized Representative
	Typed or printed name of signee

Filing Fee: \$25.00