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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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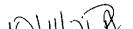
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## **COVER LETTER**

	Registration Se Division of Cor			
		calmetto Bay, ELC, a Florida li	imited liability company	<b>4</b>
SUBJEC	:T:	Name of Lim	ited Liability Company	
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ndence concerning this matter	to the following:	
		Terri G. Sonn		
			Name of Person	<del></del>
		Sonn & Mittelman, P.A.		
			Firm/Company	
		19495 Biscayne Blvd., sui	te 607	
			Address	
		Aventura, Fl. 33180		
			City/State and Zip Code	<u> </u>
		tgs@sonnmittelman.com	to be used for future annual report r	
For furth	er information c	oncerning this matter, please c		will (all will)
Terri G.	Sonn		305 466-9497	
	Name o	f Person	Area Code Day	time Telephone Number
Enclosed	is a check for th	ne following amount:		
≣ \$25.0	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 tadditional copy is enclosed)
	Mailing Addres Registration 5		<u>Street Address:</u> Registration	
	Division of C	orporations	Division of C	Corporations
	P.O. Box 632 Tallahassee, I		The Centre o 2415 N. Mon	f Tallahassee iroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Shores at Palmetto Bay, LLC, a Florida limited lia	ability company	
( <u>Name of the Limited Liability Co</u> (A Florida Lim	mpany as it now appears on our records.) ited Liability Company)	<del></del>
The Articles of Organization for this Limited Liability Comp Florida document number	nany were filed on October 18, 2005	and assigned
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 I	Jability Company," the designation "LLC" or the al	obreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
Enter new mailing address, if applicable:	c/o Sonn & Mittelman, P.A.	
(Mailing address MAY BE A POST OFFICE BOX)	19495 Biscayne Blvd., suite 607	
	Aventura, FL 33180	
B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	ice address on our records, enter the nan	
Name of New Registered Agent:		:-3
New Registered Office Address:		<u> </u>
	Enter Florida street address	÷
	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Ag	•	-T

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 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
MGR	Drew Rosen		□Add
		13080 SW 248TH ST SUITE 14 HOMESTEAD. FL	3i ≣Remove
			_ □Change
MGR	Wayne Rosen		_ 🗖 Add
		13080 SW 248TH ST SUITE 14 HOMESTEAD, FL	3∃ ≣Remove
			_ 🗆 Change
MGR Terri Grumer Sonn	Terri Grumer Sonn	19495 Biscayne Blvd., suite 607, Aventura, FL 33180	) <b>≡</b> Add
		- <u>-</u> -	_ □Remove
			_ □Change
			🗆 Add
		·	□Remove
			□Change
			□Add
			□Remove
			□Change
		<del></del>	_ DAdd
			□Remove
			_ Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	<del></del>
	······
(If an et Note:	tive date, if other than the date of filing:
he reco ord is f	rd 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 led.
Dated	September 22, 2021  Signature of a member of authorized representative of a member
	Wayne Rosen
	Typed or printed name of signee

. . . .