L060000001738

(Requestor's Name)	
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PICK-UP	WAIT	MAIL
	Business Entity Name)	
(Document Number)	
Certified Copies	Certificates of S	Status
Special Instructions	to Filing Officer:	
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COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration Sec Division of Corp			
COSHAP, I	LC		
SUBJECT:	Name of Limit	ed Liability Company	
The enclosed Articles of a	Amendment and fee(s) are subn	nitted for filing.	
	ndence concerning this matter to		
	Jay S. Shapiro		_
		Name of Person	
	COSHAP, LLC		
		Firm/Company	
	1950 N. Commerce Pkwy.,	Suite 5	
		Address	
	Weston, FL 33326		
		City/State and Zip Code	 ,
	Jay@JayShapirocpa.com	to be used for future annual report notif	fication)
For further information of	concerning this matter, please ca		
Jay S Shpiro		954 673-8573 at ()	
Name o	of Person	Area Code Daytime	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 enclosed)
Mailing Addre		Street Address: Registration Se	ction
Registration Division of (Corporations	Division of Cor	rporations
P.O. Box 63	27	The Centre of T	alianassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COSHAP, LLC		
(<u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our records.) nited Liability Company)	
The Articles of Organization for this Limited Liability Com Florida document number L06000004738		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	l liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u> </u>	
		. ,
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		<u> </u>
		:0 •)
B. If amending the registered agent and/or registered o agent and/or the new registered office address here:	ffice address on our records, <u>enter th</u>	e name of the new registere
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flor	ida
	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 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

$\mathbf{AMBR} = A$	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			Remove
			☐Change
			Remove
			Change
			□Add
			□Remove
			Change
			□Add
			Remove
			Change
			Remove
			□Add
			Remove
			□Change

SPE Provisions atta	ahced thereto. By this Amendment, the SPE Provisions are hereby deleted entirely.
The Loan described	1 in those SPE Provisions never closed.
-	
neffective date is listed, the listed of the listed inserted the listed inserted the listed inserted inserted the listed inserted	than the date of filing:(optional) he date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 I in this block does not meet the applicable statutory filing requirements, this date will not be listed a
ument's effective date	e on the Department of State's records.
ecord specifies a delaye	ed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the
s filed.	T////
August 9	2024
eed August 9	
	<i>X</i> / X \
	/ Signature of a member or authorized representative of a member

Filing Fee: \$25.00