

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.  
Account Number : 075350000353  
Phone : (800) 221-2972  
Fax Number : (917) 243-5643

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
RUNYAN LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

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2020 JUL 16 AM 9:17

SECRETARY OF STATE  
TALLAHASSEE, FL

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# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RUNYAN LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 11/21/2006 and assigned  
Florida document number L06000112846.

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 Liability Company," the designation "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**)

1 Hunting Trail

Armonk, NY 10504

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Tammie B. Massey, Esq.

New Registered Office Address:

C/O Mettler Randolph et al... 340 Royal Palm Way, Suite 100

Enter Florida street address

Palm Beach

Florida 33480

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

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MGR = Manager  
AMBR = Authorized Member

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**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

THE LLC WILL BE MANAGER MANAGED

IN THE EVENT THAT YVETTE HERSHAFT CANNOT ACT AS MANAGER THE MANAGER

WILL BE Andrew Hershaft, 37 Wampus Lakes Drive, Armonk, NY 10504

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ALBANY, NY 12242-0001

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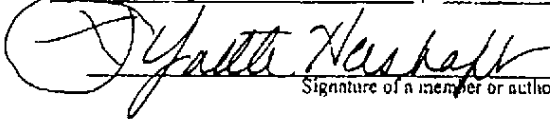
**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated July 15, 2020

Signature of a member or authorized representative of a member

Yvette Hershaft

Typed or printed name of signee