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COVER LETTER

Division	of Corporations	
	sri Flagler Street, LLC	
SUBJECT:	Name of Limited Liability Company	
The enclosed Art	icles of Amendment and fee(s) are submitted for filing.	
Please return all	correspondence concerning this matter to the following:	
	Luis E. Barreto	
	Name of Person	
	Luis E. Barreto & Associates, PA	
	Firm/Company	
	2600 S. Douglas Road, Suite 507	
	Address	
	Coral Gables, Florida 33134	
	City/State and Zip Code	
	Lbarreto@miamiprobate.com	
	E-mail address: (to be used for future annual report notification)	
For further infor	mation concerning this matter, please call:	
Luis E Barreto	Name of Person Area Code Daytime Telephone Number	
	Name of Person Area Code Daytime Telephone Number	
Enclosed is a ch	eck for the following amount:	
\$25.00 Filin	g Fee \$\Bigcup \$30.00 Filing Fee & \Bigcup \$55.00 Filing Fee & \Bigcup \$60.00 Filing F	Status &

Registration Section

TO:

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

Masri Flagler Street, LLC				
(<u>Name of the Limited</u> (A	Liability Compa Florida Limited 1	ny as it now appears o liability Company)	n our records.)	
The Articles of Organization for this Limited Liab Florida document number L07000075589		were filed on $\frac{07/23}{}$	/2007	and assigned
his amendment is submitted to amend the follow	ing:			
A. If amending name, enter the new name of the	he limited liab	ility company here	;	
The new name must be distinguishable and contain the work	ds "Limited Liabil	lity Company," the desig	gnation "LLC" or the al	obreviation "L.L.C."
Enter new principal offices address, if applicable:		2600 S. Douglas R	oad, Suite 507	
Principal office address MUST BE A STREET	Coral Gables, Florida 33134			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2600 S. Douglas R Coral Gables, Flor		
B. If amending the registered agent and/or reg agent and/or the new registered office address		address on our reco	ords, <u>enter the nan</u>	ne of the new regist
Name of New Registered Agent:	Brandon Heethman, Esquire			
New Registered Office Address:	2525 Ponce De	Leon Boulevard, Sui	te 300	
		Enter Florida	street address	
	Coral Gables		Florida	3134
		Cuy		Zıp 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>	<u>Name</u>	Address	Type of Action
MGR	Luis E Barreto, Esquire	2600 S. Douglas Road, Suite 507	\ \ Add
		Coral Gables, Florida 33134	
MGR	Zaina M. Mauhiesen	PO Box 165033	
		Miami, Florida 33116	■ Remove
			□ Change
			🗆 Add
			Remove
			□Change
			
			□Remove
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		** *	☐ Change
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Tective date, if other than the one effective date is listed, the date must tee: If the date inserted in this blocument's effective date on the De	be specific and cannot be prior ck does not meet the applic	able statutory filing	(option ore than 90 days after fil requirements, this d	ing.) Pursuant to 605.0207 (3
ecord specifies a delayed effective is filed.	date, but not an effective t	ime, at 12:01 a.m. o	n the earlier of: (b)	The 90th day after the
	2024		1/1/1/1	200
ted May 15	- 2024	- ///	4111	<i>1</i> //
	Signature of a member or auth			

Filing Fee: \$25.00