## L07000086552

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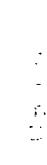




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## **COVER LETTER**

TO:	Registration Sec Division of Corp		•	<b>*</b>	
SUBJEC	Eastwind A	equisitions, LLC			
sopar.	~!· <u> </u>	Name of Lim	ited Liability Company		
The encl	osed Articles of A	mendment and fee(s) are sub	mitted for filing.		
Please re	eturn all correspon	dence concerning this matter	to the following:		
		Patty Laine			
			Name of Person		
		Eastwind Development, LI	LC		
Firm/Company					
5604 PGA Blvd., Suite 109					
			Address		
		Palm Beach Gardens, FL 3	3419		
			City/State and Zip Code		
		plaine@eastwinddevelopn			
		E-mail address: (	to be used for future annual report notif	ication)	
For furth	er information co	ncerning this matter, please co	all:		
Patty L	aine		561 370-6604 at ()		
	Name of	Person	Area Code Daytime	Telephone Number	
Enclosed	l is a check for the	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 Address:		Street Address:		

Registration Section
Division of Corporations P.O. Box 6327

 $TO \cdot$ 

Tallahassee, FL 32314

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

Eastwind Acquisitions, LLC				
(Name of the Limited Liability Cor (A Florida Limit	npany as it now appears on our records. ed Liability Company)	)		
The Articles of Organization for this Limited Liability Compa	any were filed on	and assigned		
Porida document number L07000086552				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited li	ability company here:			
The new name must be distinguishable and contain the words "Limited Li	ability 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				
		~		
		223		
Inter new mailing address, if applicable:		ACN 8202		
Mailing address MAY BE A POST OFFICE BOX)		<u></u>		
		<u> </u>		
		<u> </u>		
<ol> <li>If amending the registered agent and/or registered office and/or the new registered office address here:</li> </ol>	ce address on our records, <u>enter t</u>	ne name of the new regist		
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
	. Flor	rida		
	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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AR/VP	Omar del Rio	5604 PGA Blvd., Suite 109, Palm Beach Gardens	<b>≡</b> Add
		FL 33418	□Remove
			Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			🗆 Change
			□Add
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			□Change
			🗆 Add
			Remove
			□Change

Omar del Rio					
	<u> </u>				
				<del></del>	
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				<u>.</u>	
		-			
					<del></del>
. Effective date, if other than (If an effective date is listed, the date Note: If the date inserted in the document's effective date on the	e must be specific and cann his block does not meet t	iot be prior to date the applicable st	of filing or more than		
the record specities a delayed effected is filed.	ective date, but not an e	ffective time, at	12:01 a.m. on the c	arlier of: (b) The 90th	ı day after the
10/30 Dated	20	)23			
\ \ \ \ \ \ \ \	Signature of a member	·			

Typed or printed name of signee