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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GILMAN CIOCIA INC.

Account Number : I20120000051

Phone : (305)937-7773

Fax Number

: (815)301-2897

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LAKE WORTH PLAZA, L.L.C.

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF 2020 JUli -8 AH 11: 52

LAKE WORTH PLAZA, L.L.C.		1	3 ··· ·
(Name of the Limited Liabi (A Florid	lity Company as it now appears or du Limited Liability Company)	our records.)	•
The Articles of Organization for this Limited Liability	Company were filed on 01/31/	2008	and assigned
Florida document number L08000011599			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability company here:		
The new name must be distinguishable and contain the words "Li	mited Liability Company," the desig	nation "LLC" or the	abbreviation "L.IC."
Enter new principal offices address, if applicable:		* ************************************	
(Principal office address MUST BE A STREET ADD	PRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·	
	410 10 1 10 10 10 10 10 10 10 10 10 10 10		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	ed office address on our reco :	rds, <u>enter the n</u>	ame of the new register
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida	street address	
	City:	, Florida	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. Thereby 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

2020 JUN -8	Aif 11: 52
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Title	Name	Address	Type of Action
MGRM	THOMAS ALMA	230 NE 26 AVE STE 403	
4 Species was maddle		BOYNTON BEACH, FL 33435	
			□Add
			Петюче
			□Change
			Cladd
			□Remove
			Change
			①Add
			□Remove
			☐Change
			DAdd
		All the second s	□Remove
			☐ ☐ Change
			OAdd
			□Remove
			□Change

amending any other information, enter change(s) here:	3011-8 Ail 11: 52
N/A	
	-
fective date, if other than the date of filing: n effective date is listed, the date must be specific and cannot be prior to te: If the date inserted in this block does not meet the application current's effective date on the Department of State's records.	(optional) o date of filing or more than 90 days after filing.) Pursuant to 605.0; ble statutory filing requirements, this date will not be listed
ecord specifies a delayed effective date, but not an effective tir is filed.	ne, at 12:01 a.m. on the earlier of: (b) The 90th day after t
06/08	
Alle & B Co bree of	rized representative of a member
<i>•</i>	
CARBONELL, MAGALI G	