L09000 101177

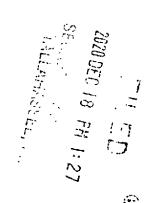
(Re	questor's Name)	
bA)	dress)	
hA)	dress)	
(7.13	u.200,	
(Cit	y/State/Zip/Phone	#)
☐ PICK-UP	MAIT	MAIL
(Bu	siness Entity Nam	e)
Ç.a. sa	,	,
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



400356520524

12/18/20--01019--004 **25.00



LAA-1/29/21

COVER LETTER

	istration Sec ision of Corp			•
	FLORIDA F	B-5 REGIONAL CENTER, I	LLC	
SUBJECT:		Name of Limited Liability Company		
The enclosed	I Articles of A	amendment and fee(s) are sub	mitted for filing.	
Please return	all correspon	dence concerning this matter	to the following:	
		CHARLES L STARR		
			Name of Person	
		RIA		
			Firm/Company	
		1626 RINGLING BLVD.	STE 500	
			Address	
		SARASOTA, FL 34236		
			City/State and Zip Code	
		LSTARR@RIA.COM	to be used for future annual report notif	(ication)
For further in	nformation co	ncerning this matter, please ca		
KAROLINA	. WIECZORI	iκ	941 387-1200 at ()	
	Name of	Person	at () Area Code Daytime	: Telephone Number
Enclosed is a	check for the	e following amount:		
■ \$25.00 F	iling 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:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FLORIDA EB-5 REGIONAL CENTER	R, LLC	
(Name of the Limited L (A F	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liabil Florida document number <u>L09000101177</u>		signed
This amendment is submitted to amend the following	ing:	
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and contain the words	s "Limited Liability Company," the designation "LLC" or the abbreviation "I	IC."
Enter new principal offices address, if applicable	e:	
(Principal office address MUST BE A STREET A	(DDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO. B. If amending the registered agent and/or	registered office address on our records, enter the name	
registered agent and/or the new registered office	e address here:	- A
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
<u>-</u>	, Florida	
	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

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	Starr, Charles L	1626 RINGLING BLVD, STE 500	
		SARASOTA, FL 34236	■ Remove
			Change
MGR	Vawter, Donald	541 Giordano Drive	
		Yorktown Heights, NY 10598	Remove
			Change
			□ Remove
			□ Change
			Remove
			Change
			🗖 Add
			Remove
			Change
			Add
			Remove
			Change

amending any other informat					
				 -	
					•
				<u> </u>	-
					-
					•
					_
		<u> </u>			-
					-
					-
					_
					_
					-
					-
		<u> </u>			-
					_
					_
	-	 _			
fective date, if other than the neffective date is listed, the date must ote: If the date inserted in this blocument's effective date on the De	ick does not meet the app	licable statutory fill	(opti nore than 90 days after ng requirements, thi	onal) filing.) Pursuant to 60: s date will not be list	5.0207 ted as
record specifies a delayed The 90th day after the reco	effective date, but ord is filed.	not an effective	time, at 12:01 a	a.m. on the earli	er of
December 17	2020				
(Y	Signature of a member or a				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00