# L100001149910

(Re	equestor's Name)	
(Ad	idress)	
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(Cıl	ty/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Name)	
(Do	ocument Number)	
Certified Copies	Certificates o	of Status
Special Instructions to File	ng Officer:	
:		
	J. HORNE	
	JUL 17 2024	
(But (Do	wAIT  usiness Entity Name)  ocument Number)  Certificates of	MAIL

Office Use Only



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## **CORPORATE** ACCESS,

#### When you need ACCESS to the world

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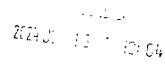
236 Fast 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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		PICK UP	BROOK 7/16
		CERTIFIED COPY	
;	XX	РНОТОСОРУ	
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;	ХХ	FILING	LLC AMEND
1.		HAUSMANN DEVELOPME (CORPORATE NAME AND DOCUMEN	
2.		(CORPORATE NAME AND DOCUMEN	Ϋ́T #)
3.		WANDALE SAME AND DANGEROS	YP in
		(CORPORATE NAME AND DOCUMEN	N 1 #)
4.		(CORPORATE NAME AND DOCUMEN	VΓ#)
<i>5</i> .	-	(CORPORATE NAME AND DOCUMEN	NT #)
6.			
	•	(CORPORATE NAME AND DOCUMEN	NT #)
SPEC	CIAI	. INSTRUCTIONS:	

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



HAUSMANN DEVELOPMENT GR	OUP, LLC		
(Name of the Limited	Liability Com Florida Limite	pany as it now appears on o d Liability Company)	ur records.)
The Articles of Organization for this Limited Liab Florida document number	bility Compar	ny were filed on 11/01/2	010 and assigned
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	he limited lia	ibility company here:	
N/A			
The new name must be distinguishable and contain the wor	ds "Limited Lia	bility Company," the designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applical	ole:	N/A	
If amending name, enter the new name of the limited liability company here:  If amending name, enter the new name of the limited liability company here:  In amending name, enter the new name of the limited liability company," the designation "LLC" or the abbreviation "LLC."  In amending offices address, if applicable:  Incipal office address MUST BE A STREET ADDRESS)  It amending address, if applicable:  In address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address on our records, enter the name of the new registered not and/or the new registered office address here:  Name of New Registered Agent:  N/A			
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE B	<u>ox)</u>	N/A	
		e address on our record	is, enter the name of the new registered
Name of New Registered Agent:	N/A		
New Registered Office Address:			
		Enter Florida st	reet address
			, 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

Title	Name	Address	Type of Action
MGR	EVELYNE D. HAUSMANN	6000 ISLAND BLVD 1402	
		AVENTURA, FL 33160	≣Remove
			□Change
			□Rcmove
		**************************************	□Chang <b>e</b>
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Effective date, if other the	in the date of filing:			(optional)	
(If an effective date is listed, the d Note: If the date inscrted in document's effective date or	this block does not mee	et the applicable sta	f filing or more than 90 da tutory filing requireme	ys after filing.) Pursuant to 605. nts, this date will not be liste	i.0207 ( ed as t
ne record specifies a delayed e ord is filed.	ffective date, but not ar	n effective time, at 1	2:01 a.m. on the earlie	r of: (b) The 90th day after	r the
Dated July 15		2024			
DocuSigner ( )	, , , , , , , , , , , , , , , , , , ,		presentative of a member		

Typed or printed name of signee