

L110000067140

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

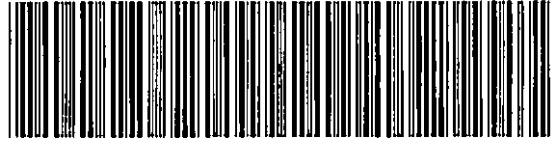
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
TALLAHASSEE, FLORIDA

2021 NOV -2 PM 1:33

2021 NOV -2 PM 10:09

Amend

NOV 03 2021
ALBRITTON

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 11/2/2021

****WALK IN****

ENTITY NAME PRH NE 28TH STREET LLC

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXXXXXX

Plain Copy

Certified Copy

Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certified Copy of Arts & Amendments Complete File (Including Annual Reports)

Certificate of Status

Certificate of Status Reflecting: _____

****APOSTILLE' / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$ 25.00

ACCOUNT # 120160000072

W: c DW

Please call Tina at the above number for any issues or concerns. Thank you so much!

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

PRH NE 28TH STREET LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 06/08/2011 and assigned
Florida document number L11000067140

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability 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)

2850 Tigertail Ave. Suite 800

Miami, FL 33133

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2850 Tigertail Ave. Suite 800

Miami, FL 33133

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	PRH INVESTMENTS, LLC	2850 Tigertail Ave, Suite 800	<input type="checkbox"/> Add
		Miami, FL 33133	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
VP	Carlos Rosso	2850 Tigertail Ave, Suite 800	<input type="checkbox"/> Add
		Miami, FL 33133	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
VP	Sonia Figueroa	2850 Tigertail Ave, Suite 800	<input type="checkbox"/> Add
		Miami, FL 33133	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
President	Jorge M Perez	2850 Tigertail Ave, Suite 800	<input type="checkbox"/> Add
		Miami, FL 33133	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
VP	Matthew Allen	2850 Tigertail Ave, Suite 800	<input type="checkbox"/> Add
		Miami, FL 33133	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
Secretary, VP	Jeffery Hoyos	2850 Tigertail Ave, Suite 800	<input type="checkbox"/> Add
		Miami, FL 33133	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated November 1st 2021

SS

Signature of a member or authorized representative of a member

Saray Djidji, Attorney in Fact

Typed or printed name of signee

Filing Fee: \$25.00