

Florida Department of State
 Division of Corporations
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L1100087409

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To:
 Division of Corporations
 Fax Number : (850)617-6383

From:
 Account Name : BILZIN SUMBERG BAENA PRICE & AXELROD LLP
 Account Number : 07535000132
 Phone : (305)374-7580
 Fax Number : (305)351-2122

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

Email Address: afinley@bilzin.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
 BIRD-WAL, LLC**

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DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA

DEPARTMENT OF STATE
 TALLAHASSEE, FLORIDA

2023 AUG -7 AM 7:51

APPROVED
 AND
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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

((H23000273948 3))

BIRD-WAL, 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 July 29, 2011 and assigned Florida document number 111000087409

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:

1052 Poplar Circle

(Principal office address MUST BE A STREET ADDRESS)

Weston, Florida 33326

Enter new mailing address, if applicable:

(same)

(Mailing address MAY BE A POST OFFICE BOX)

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:

William S. Lebo

New Registered Office Address:

1052 Poplar Circle

Enter Florida street address

Weston

Florida

City

33326

Zip Code

APPROVED AND FILED
2023 AUG - 7 AM 7:53
SECRETARY OF STATE
TALLAHASSEE, FL

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

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If amending authorized person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

((H23000273948 3))

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	William S. Lebo	1052 Poplar Circle	<input checked="" type="checkbox"/> Add
		Weston, Florida 33326	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Marital Trust under the Jeffrey A. Kramer 2001 Revocable Trust	1801 West 27th Street	<input type="checkbox"/> Add
		Miami Beach, Florida 33140	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	GST Exempt Marital Trust under the Jeffrey A. Kramer 2001 Revocable Trust	1801 West 27th Street	<input type="checkbox"/> Add
		Miami Beach, Florida 33140	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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