# L12000059277

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R. HUNT 06/12/23

### **COVER LETTER**

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### TO: **Registration Section Division of Corporations**

East West Investments, LLC \_\_\_\_\_

SUBJECT:

Name of Limited Liability Company

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The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Marcia Nass

		Name of Person		
	East West Resources Corj	poration	من م	. :
		Firm/Company		•
	9200 Corporate Blvd., Su	ite 250	PH PH PH PH	[ i i e====
	Rockville, MD 20850	Address	7:32 EEE.FL	
	·	City/State and Zip Code		
	mnass@ewreorp.com			
	E-mail address:	to be used for future annual report notifi	cation)	
For further information c	concerning this matter, please c	all:		
Marcia Nass		240 499-4021 at ( )		
Name o	of Person		Telephone Number	
Enclosed is a check for the	he following amount:			
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	<ul> <li>\$55.00 Filing Fee &amp; Certified Copy (additional copy is enclosed)</li> </ul>	S60.00 Filing Fec, Certificate of Status & Certified Copy (additional copy is enclosed)	

Mailing Address: **Registration Section** Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: **Registration Section** Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

### (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 05/02/2012 and assigned Florida document number 712000059277

This amendment is submitted to amend the following:

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

East West Hospitality Group, LLC

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:

(Mailing address MAY BE A POST OFFICE BOX)

Enter new mailing address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

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

Name of New Registered Agent:	<u> </u>	
New Registered Office Address:		
	Enter Florida street add	ress
		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 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>	Name	Address	Type of Action
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		,	🗆 Remove
		 	Change
			CRemover SECTION CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREMOVER CREM
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### D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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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.

05/15 Dated	2023	
	Signature of a member or authorized representative of a member	
Marcia Nass		

Typed or printed name of signee