## L1300000 6268

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PICK-UP WAIT MAIL
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Special Instructions to Filing Officer:





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## **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: SCA	glass Proper	-ty Mauagem.	ent LLC	
	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	Ma	ria C. Mor	20	
	C 0 1	Name of Person	•	
	Sea Ylass	Proper Mar Proper Man Firm/Company	igent (1)	
	1035 5 9	State Rd7-!	Sin 4 315#7	
		Address		
	Welling	City/State and Zip Code 299 1955 Doma to be used for future annual report no	1/4	
		City/State and Zip Code	1	
	E-mail address: (	to be used for future annual report no	otification)	
For further information c	oncerning this matter, please c			
Мапа С	· Moro	.561. 21	5-1604	
	f Person	at (561) 21 Area Code Dayti	me Telephone Number	
Enclosed is a check for th	ne following amount:			
\$25,00 Filing 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:		Street Address:		
Registration Section		<del>-</del>	Registration Section	
Division of Corporations P.O. Box 6327			Division of Corporations The Centre of Tallahassee	
Tallahassee, FL 32314			2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on  $\frac{O1/11/20/3}{}$  and assigned Florida document number <u>L13000006</u> Z68 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 Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Muiling 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: New Registered Office Address: Enter Florida street address City

## 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>Titte</u>	<u>Name</u>	Address	Type of Action
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E. Effective date, if other than the date of filing: 11772023 (optional)  (If the reference 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 (3x)6  Note: 1 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 11/20/2023	D. If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
F. Effective date, if other than the date of filing:	• •	
E. Effective date, if other than the date of filing:    1   17   2023   (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 (3xb 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   11   20   2023		
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MICHIGA	Data	11/20/2023
	Dated _	A M ( / William)
Signature of a member of authorized representative of a member  MC, MC MORO / MCG Management, AMBR		

Typed or printed name of signee