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Division of Corporations Electronic Filing Cover Sheet

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Electronic Filing Menu Corporate Filing Menu

Help

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| JULIA DOROTHY, LLC                                                                                                   | 202                                                          | SLAID      |
|----------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|------------|
| (Name of the Limited Liability Compar<br>(A Florida Limited L                                                        | ny as it now appears on our records.)<br>Lability Company)   | CHIT       |
| The Articles of Organization for this Limited Liability Company                                                      | were filed on 01/15/2013 and assi                            | UF CIT     |
| Florida document number L13000007195                                                                                 |                                                              |            |
| This amendment is submitted to amend the following:                                                                  | AH IU: T                                                     |            |
| A. If amending name, enter the new name of the limited liabil                                                        | lity company here:                                           | -          |
| PRINCESS ANNA, LLC                                                                                                   |                                                              |            |
| The new name must be distinguishable and contain the words "Limited Liabilit                                         | ity 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)                                                                  |                                                              |            |
|                                                                                                                      |                                                              | <u> </u>   |
| Enter new mailing address, if applicable:                                                                            |                                                              |            |
| (Mailing address MAY BE A POST OFFICE BOX)                                                                           |                                                              |            |
|                                                                                                                      |                                                              |            |
| B. If amending the registered agent and/or registered office ac agent and/or the new registered office address here: | ddress on our records, <u>enter the name of the new</u>      | registered |

| Name of New Registered Agent:  | PEDRO A. ARIZ, ESQ                            | ·                                  |
|--------------------------------|-----------------------------------------------|------------------------------------|
| New Registered Office Address: | 2103 CORAL WAY, SUITE 800<br>Enter Florida st | reet address                       |
|                                | MIAMI<br>City                                 | , Florida <u>33145</u><br>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

Type of Action

Remove

\_ 🖸 Add

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

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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 fil ng.) 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

| Dated AUGUST 23     | , 2021                                                         |
|---------------------|----------------------------------------------------------------|
|                     |                                                                |
|                     | Signature of a member or authorized representative of a member |
| PEDRO A. ARIZ, ESQ. |                                                                |

Typed or printed name of signee