L13000143326

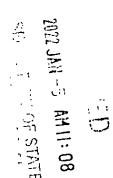
(Re	equestor's Name)	
(Ac	ddress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name	
(Dc	ocument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	

Office Use Only



700378803857

PO TE, 20-49, (1994-104 - 4429, i);



★ A. RIVERS

JAN 1 9 2022

COVER LETTER

TO: Registration So Division of Cor					
	PERTY, LLC				
SUBJECT:	Name of Lim	nited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Jason M Lazar				
		Name of Person			
	Investments Limited				
		Firm/Company			
	215 N Federal Highway				
		Address			
	Boca Raton, FL 33432				
		City/State and Zip Code			
	jlazar@investmentslimited.				
For further information (e-mail address: (concerning this matter, please c	to be used for future annual report rall:	ouncation)		
Jason M. Lazar		561 392-8920			
Name o	of Person	at () Area Code Day	time Telephone Number		
Enclosed is a check for t	he 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)		
<u>Mailing Addre</u> Registration		Street Address: Registration			
Division of C	Corporations	Division of C	Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ECJA PROPERTY, LLC				
(Name of the Limite	d Liability Compa A Florida Limited L	ny as it now appears on ou liability Company)	r records.)	
The Articles of Organization for this Limited Li Florida document number L13000143326				and assigned
This amendment is submitted to amend the follo	owing:			
A. If amending name, enter the new name of	the limited liab	ility company here:		
The new name must be distinguishable and contain the w	ords "Limited Liabil	lity Company," the designat	ion "LLC" or the a	abbreviation "L.L.C."
		215 N. FEDERAL HIG		
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		BOCA RATON, FL 3	3432	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		215 N. FEDERAL HI BOCA RATON, FL 3		2022
B. If amending the registered agent and/or ragent and/or the new registered office addre	egistered office : ss here:	address on our record	s, <u>enter the na</u>	
Name of New Registered Agent:	JAMES H. BA	TMASIAN		AH II: D8
New Registered Office Address:	215 N. FEDER	RAL HIGHWAY Enter Florida str	eet address	A 0
	BOCA RATO		, Florida _	33432
		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>	Type of Action
MGRM	MARK DUFFY	4220 N.E. 31ST AVENUE	□Add
		LIGHTHOUSE POINT, FL 33064	=Remove
			☐ Change
MGR JAMES H. BATMASIAN	JAMES H. BATMASIAN	215 N. FEDERAL HIGHWAY	\equiv \equ
	BOCA RATON, FL 33432	□Remove	
			Change
			□Add
			Петюче
			Change
			□Add
		□ Rетюче	
			Change
			Петюче
			□ Change
			□Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
E. Effective date, if other than the date of filing: (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
Signature of a dember or authorized representative of a member
Typed or printed name of signee

Filing Fee: \$25.00