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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : WARD, DAMON & POSNER, P.A.

Account Number : 072262000447 Phone : (561)842-3000 Fax Number : (561)842-3626

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

닖Email Address:(

LICAMNE

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ABARS PROPERTIES LLC

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Corporate Filing Menu

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	Registration Sec Division of Corp		#	•
CUD IEC		OPERTIES LLC		٠.
SUBJEC	· I.:	Name of Lim	ited Liability Company	-
The enclo	osed Anicles of A	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ndence concerning this matter	to the following:	
		Adam R. Seligman, Esq.		
			Name of Person	<del></del>
		Ward Damon PL		
			Firm/Company	
		4420 Beacon Circle		
			Address	<del></del>
		West Palm Beach, FL 3340	07	
			City/State and Zip Code	
		aseligman@warddamon.com	n to be used for future annual report noti	(faction)
For furth	er information co	oncerning this matter, please c	-	ncanon)
		meening this matter, prease o		
Adam R.	Seligman		561 842-3000 at ()	
	Name of	Person	Area Code Daytim	e Telephone Number
Enclosed	is a check for th	e following amount:		
<b>\$25.</b> 0	00 Filing Fee	S30.00 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	<u>s:</u>	Street Address:	

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

ABARS PROPERTIES LLC		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our record. Liability Company)	34)
The Articles of Organization for this Limited Liability Company	y were filed on 10/14/2013	and assigned
Florida document number L13000144200		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	pility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	4420 Beacon Circle	
(Principal office address MUST BE A STREET ADDRESS)	West Palm Beach, FL 33407	
Enter new mailing address, if applicable:	4420 Beacon Circle	202
(Mailing address MAY BE A POST OFFICE BOX)	West Palm Beach, FL 33407	<u></u>
B. If amending the registered agent and/or registered office	address on our records, enter	the name of the new register
agent and/or the new registered office address here:		5:
Name of New Registered Agent:		·.΄ ω
New Registered Office Address:		
	Enter Florida street addres.	5
		orida
	City	Zia Code

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

Title	Name	Address	Type of Action
MGR	Adam R. Seligman	4420 Beacon Circle	
		West Palm Beach, FI, 33407	□Remove
	·		<b>≘</b> Change
			□Add
		<del></del>	□ Remove
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Tective date, if other than the date of filing:	uant to 605,020 not be listed as
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th is filed.	h day after the
ated June 27 2023	
Signature of a member or allthorized representative of a member	<del></del>

Filing Fee: \$25.00