L15000039958

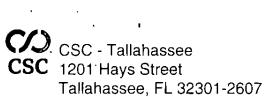
	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UF	WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer: J. HORNE
:	DEC 2 8 2023

Office Use Only



400420632444





850-558-1500, Ext: 61594

To: Department Of State, Division Of Corporations

From: Eyliena Baker

Ext: 61594 Date: 12/27/23 Order #: 1371399-2

Re: 1701 MIAMI (OWNER) LLC Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Amount to be deducted from our State Account: \$25.00 - FL State Account Number:

I2000000195 Authorization:

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

Tallahassee, FL 32314

TO: Registration S Division of Co					
	ni (Owner) LLC				
SUBJECT:		nited Liability Company			
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	Leslie Schillig				
		Name of Person	 _		
	DLA Piper LLP (US)				
	 	Firm/Company			
3111 W Dr MLK Jr Blvd, Suite 200					
		Address			
	Tampa, FL 33607				
		City/State and Zip Code			
	leslie.schillig@us.dlapiper.o	com to be used for future annual report n	votitiverien)		
For further information of	concerning this matter, please c		ionnearou _i		
Leslie Schillig		813 222-5907 at ()			
Name (of Person		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)	Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Addre	Section	Street Address: Registration S	Section		
Division of C P.O. Box 632		Division of C The Centre of	-		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1701 MIAMI (OWNER) LLC (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 AUGUST 6, 2014 and assigned Florida document number <u>L1500029958</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Emerald (Owner) LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing 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

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.

City

___. Florida ___

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>	Address	Type of Action
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			□Remove
			□ Change
			□ Add
			□Remove
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Effective date, if other than the If an effective date is listed, the date mu. Note: If the date inserted in this bedocument's effective date on the I	ist be specific and lock does not r	d cannot be prior to meet the applicab	date of filing or more	(option re than 90 days after requirements, this	filing.) Pursuant to 60	05.0207 (sted as t
	ve date, but not	t an effective time	e, at 12:01 a.m. or	the earlier of: (b)	The 90th day aft	er the
rd is filed.						
e record specifies a delayed effecti rd is filed. December 27	·	2023	. Es	Vie Vehill	i, .	
	Signature of a	. 2023 . member or authoriz	. Es	lέ Vehill	ig .	

COVER LETTER

Division of Corp	orations			
	(Owner) LLC			
SUBJECT:	Name of Limi	ited Liability Company		. <u> </u>
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.		
Please return all correspon	dence concerning this matter	to the following:		
	Lestie Schillig			
		Name of Person		
	DLA Piper LLP (US)			
		Firm/Company		
	3111 W Dr MLK Jr Blvd.	Suite 200		
		Address		
	Tampa, FL 33607			
		City/State and Zip Code		
	leslie.schillig@us.dlapiper.c	om to be used for future annual rep	vort notification)	
For further information co	ncerning this matter, please ca		or nonneation;	
Leslie Schillig		813 222-5		
Name of Person		at ()	Daytime Telephor	
Name of	Person	Area Code	Баунте Тетерло	ne Number
Enclosed is a check for the	e following amount:			
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclos		\$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address:	<u>:</u>	Street Add	ress:	

Registration Section

TO:

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