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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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

Email Address:_____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN OCPBC INVESTMENTS JFK, LLC

Certificate of Status	0
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Page Count	05
Estimated Charge	\$25.00



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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OCPBC Investments JFK, LLC	ited Liability Company	v as it now appears on our records.)		
(stante of the Litt	(A Florida Limited Li	y as it now appears on our records.) ability Company)		
The Articles of Organization for this Limited	Liability Company w	were filed on June 23, 2015	an	d assigned
lorida document number L15000108480				
his amendment is submitted to amend the fo	llowing:			
A. If amending name, enter the new name	of the limited liabil	ity company here:		
180 JFK Drive, LLC				
The new name must be distinguishable and contain the	words "Limited Liabilit	y Company," the designation "LLC" or	the abbreviation	on "L.L.C."
Enter new principal offices address, if appl	icable:			· · · ·
Principal office address MUST BE A STRE	ET ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		Plotnik, Feinberg & Associates, P.O. 27313 Southfield Road	C., Attn: Bru	ce Plotnik
		Llathrup Village, MI 48076		
B. If amending the registered agent and/or agent and/or the new registered office address. Name of New Registered Agent:	-		name of th	e new regi
Name of New Registered Agent.	001.140.4		** *	9 7
New Registered Office Address:	801 US-1	Enter Florida street address	•	
	North Palm Beac		a 33408	9.
		City	Zip (्रस्तर _ः

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.

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Ashley Perkins, Special Secretary

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	Type of Action
MGR	Marvin Kohn	180 JFK Drive	
		Suite 100	Remove
		Atlantis, FL 33462	
MGR Gerard D'Ariano	Gerard D'Ariano	180 JFK Drive	
		Suite 100	
		Atlantis, FL 33462	≅ Change
MGR	R John Levin	180 JFK Drive	
		Suite 100	
		Atlantis, FL 33462	_
DIR	IR James Clancy	180 JFK Drive	□Add
		Suite 100	
	Atlantis, FL 33462	☐ Change	
DIR	IR Michael A. Cohn	180 JFK Drive	
		Suite 100	■ Remove
		Atlantis, FL 33462	Change
DIR	IR Gary Richman	180 JFK Drive	
		Suite 100	■Remove
		Atlantis, FL 33462	□ 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

<u>Title</u>	Name	Address	Type of Action
DIR	Ezra A. Berkowitz	180 JFK Drive	
		Suite 100	Remove
		Atlantis, FL 33462	
			□Add
			Remove
			□Add
			□Remove
			☐ Change
			□Ad d
			□Remove
			Change
			□Add
			□Remove
			□ Change
			□ Add
		 	□ Remove
			Change

	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
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	<u> </u>
Note: If t	date, if other than the date of filing:
e record sprd is filed.	pecifies 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 Ap	ril 2022
	· MH ·
	Signature of a member or authorized representative of a member
	Maryin Kohn
	Typed or printed name of signee