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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GARY, DYTRYCH & RYAN, P.A.

Account Number: I19990000255

Fax Number

Phone : (561)844-3700 : (561)844-2388

**Enter the email address for this business entity to be used for future

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 89 BERGEN STREET, LLC

RECEIVED MAR 0 1 2019

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

89 BERGEN STREET, LLC		
(Name of the Lim	ited Liability Company as it now appe (A Florida Limited Liability Company	ars on our records.)
The Articles of Organization for this Limited I	Liability Company were filed on _	06/24/2015 and assigned
Florida document number L15000109980	· · · · · · · · · · · · · · · · · · ·	
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name	of the limited liability company	<u>here</u> :
The new name must be distinguishable and contain the	words "Limited Liability Company," the	designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	三 三 三
Principal office address MUST BE A STRE	ET ADDRESS)	902 - m
		1000
Enter new mailing address, if applicable:		10 K
Mailing address MAY BE A POST OFFICE	BOX	
3. If amending the registered agent and	Vor registered office address of	on our records, enter the name of the new
egistered agent and/or the new registered of	ottice address nere:	
Name of New Registered Agent:	LORRAINE A. GERRITY	
New Registered Office Address:	2000 SOUTH OCEAN BLVD,	APT. 307S
	Enter Fi	orida street address
	PALM BEACH	, Florida ³³⁴⁸⁰
	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

Page 1 of 3

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
MGR	EDWARD T. GERRITY	2000 SOUTH OCEAN BLVD APT, 307S	□ Add
		PALM BEACH, FL 33480	■ Remove
			☐ Change
MGR	LORRAINE A. GERRITY	2000 SOUTH OCEAN BLVD APT. 307S	A dd
		PALM BEACH, FL 33480	Remove
			Change
			Add Add
			Remove
			LORILA LORILA
			Remove
			Change
			D Add
			Remove
			Change
			D Add
			□ Remove
			☐ Change

mending any other inform:	ation, enter change(s) here: (Attach addition	nal sheets, if necessary.)
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fective date, if other than the	e date of filing: ust be specific and cannot be prior to date of filing or mo-	(optional) re than 90 days after filing.) Pursuant to 605.0
te: If the date inserted in this boument's effective date on the l	block does not meet the applicable statutory filing	requirements, this date will not be listed
cantent 3 critective date on the r	sopulation of state 3 records.	
record specifies a delaye The 90th day after the re	ed effective date, but not an effective tinction cord is filed.	me, at 12:01 a.m. on the earlier
February 27	2019	
ted	,	
	nomicallicrate	
		of a member
<u> </u>	Signature of a member or authorized representative of	
LORRAINE A. GERF		•

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Filing Fee: \$25.00