Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000449814 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : STEARNS WEAVER MILLER WEISSLER ALHADEFF & SITTERSON

Account Number : I20060000135 Phone

: (305)789-3200

Fax Number

: (305)789-4137

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

Email Address:

elaine.santiago@cornerstonegrp.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CORNERSTONE EAGLE'S LANDING, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$55.00

C. BRUMBLE Honic Filing Menu

Corporate Filing Menu

Help

ۻ

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CORNERSTONE BAGLE'S LANDING, LLC	
(Name of the Limited Liability Company as it now (A Florida Limited Liability Comp	nonears on our records.) pany)
The Articles of Organization for this Limited Liability Company were filed or	On October 21, 2016 and assigned
Florida document number L16000194436	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability compa	ny here:
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 applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	7. 0
Enter new mailing address, if applicable:	21 DE
•	
(Mailing address MAY BE A POST OFFICE BOX)	
	SOC. 75 111
B. If amending the registered agent and/or registered office address on o	our records, enter the name of the new registers
agent and/or the new registered office address here:	97
	8
Name of New Registered Agent:	
New Registered Office Address:	
Ente	r Florida street address
	Florida
City  New Registered Agent's Signature, if changing Registered Agent:	Zıp 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 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>	Address	Type of Action
MGR	Jorge Lopez	2100 Hollywood Blvd.	□ Add
		Hollywood, PL 33020	≅Remove
			☐ Change
AMBR	Cornerstone Eagle's Landing, Inc.	2100 Hollywood Blvd.	≣Add
		Hollywood, FL 33020	□R <del>c</del> move
			) □Change
AMBR	Cornerstone Properties, Ltd.	2100 Hollywood Blvd.	≅Add
		Hollywood, FL 33020	□Remove
			Change
			□Add
			Remove
			□Change
<u>-</u>			□Add
			□ Remove
			□ Change
			□Remove

·	· • · · · · · · · · · · · · · · · · · ·	<del></del>			
			······································	····	
			·		
	<del></del>		<del></del>		
-					
				,	
-					
<del></del>			<del></del>		
<del> </del>					
				•	
			<del></del>	<del></del>	
fective date, if other affective date is listed to the date inserted in the date inserted and the date inserte	ted in this block doe	is not meet the appl	icable statutory fi	optio r more than 90 days after ling requirements, this	nal) filing.) Pursuant to 605.0207 date will not be listed as
coord specifies a dele s filed.	tyed effective date, l	but not an effective	time, st 12:01 s.n	n. on the earlier of: (b)	The 90th day after the
December S	<i>y</i>	2021	<u> </u>		
	¥	1- h/			
·	Sign tu	<u> </u>	horized representati		

Filing Fee: \$25.00