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To:	Division of Consenting			
	Division of Corporations Fax Number : (850)617-6383			
From:			(0	2(
	Account Name : CAPITOL SERVICES,	INC.	글만	2024 OCT   4
	Account Number : I20160000017			9
	Phone : (855)498-5500 Fax Number : (800)432-3622		7×51	Ή
	1 D. Hambel . (000)432-3022		<b>支</b> 犯	<u>†</u>
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4 OCT 14 PM 1: 4   EPARTMENTION STATE ISIGN OF CORPORATIONS	Certificate of Status	or M/MG R	ESIGN	PM 4:41

M. SOLOMON

OCT 1 4 2024

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Corporate Filing Menu

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## **COVER LETTER**

TO: Registration Se Division of Cor			H24000343794	•
	PROPERTY HOLDINGS, LL	С		
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	MATTHEW JACOBSON			
		Name of Person	<del></del>	
	CARLTON FIELDS, P.A.		10 🔼	د
		Firm/Company		2
	700 N.W. 1ST AVENUE,	SUITE 1200	ZEC ZEC ZEC	7
		Address		-
	MIAMI, FLORIDA 33136	i	ალ <del>ო</del>	<u> </u>
		City/State and Zip Code	TO F	-
	MJACOBSON@CARLTO	NFIELDS.COM to be used for future annual report notif	nn <del>-</del>	-
For further information of	oncerning this matter, please c	•	Chilon)	
МАТТНЕМ Н. ЈАСОВ		305 539-7372		
Name o	f Person	at (	Telephone Number	
Enclosed is a check for the	te following amount:			
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Pec & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fcc, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addres Registration		<u>Street Address:</u> Registration Sec	tion	
Division of C	Corporations	Division of Corp	porations	
P.O. Box 632 Tallahassee, I		The Centre of Tr 2415 N. Monroe	Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H24000343794

	mpany as it now appears on our recordited Liability Company)	<b>.</b>
The Articles of Organization for this Limited Liability Comp Florida document number <u>L16000201792</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and contain the words "Limited I	Liability Company," the designation "LLC	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		2
Principal office address MUST BE A STREET ADDRESS	5)	024 E
		E
		· F
Enter new mailing address, if applicable:		(/, -
•		77.0 27.0 27.7
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		
Mailing address MAY BE A POST OFFICE BOX)		## ## ## ## ## ## ## ## ## ## ## ## ##
•	ice address on our records, enter	## ## ## ## ## ## ## ## ## ## ## ## ##
Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	ice address on our records, <u>enter</u>	## ## ## ## ## ## ## ## ## ## ## ## ##
Mailing address MAY BE A POST OFFICE BOX)  3. If amending the registered agent and/or registered off	ice address on our records, enter	## ## ## ## ## ## ## ## ## ## ## ## ##
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Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address here:  Name of New Registered Agent:	ice address on our records, <u>enter</u> Enter Florida street addre	the name of the new regis
Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address here:  Name of New Registered Agent:	Enter Florida street addre.	the name of the new regis

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MCR =	Manager	
AMRD -	Authorizad	Mombay

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<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	MICHAEL BUZA	!165 2ND STREET	LJAdd
		VERO BEACH, FLORIDA 32960	■Remove
			Change
AP	MATTHEW H. JACOBSON	700 N.W. IST AVENUE	≅Add
		SUITE 1200	□Remove
		MIAMI, FLORIDA 33136	[] [] Change
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E. Effective date, if other than the (If an offective date is listed, the date mu Note; If the date inserted in this is document's effective date on the E	st be specific and cannot be prior to date of fil lock does not meet the applicable statute	(optional) ing or more than 90 days after filing.) Pursuan rry filing requirements, this date will not	t to 605.0207 (3)(b) be listed as the
f the record specifies a delayed effective ecord is filed.	re date, but not an effective time, at 12:0	I a.m. on the earlier of (b) The 90th di	ay after the
Dated AUGUST	, 2024		
	mon		
***************************************	Signature of a member or authorized repres	entative of a member	<del></del>
MICHAEL BUZA	. Typed or printed name of s		

Filing Fee: \$25.00