

# Florida Department of State

## Division of Corporations

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H240002210023-ABCN

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**To:**

Division of Corporations  
Fax Number : (850)617-6383

**From:**

Account Name : ZIMMERMAN, KISER, & SUTCLIFFE, P.A.  
Account Number : I19990000006  
Phone : (407)425-7010  
Fax Number : (407)425-2747

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

Email Address: corporate@zkslaw.com

### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

### THE LOFT DOWNTOWN II, LLC

Certificate of Status	0
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M. SOLOMON

JUN 27 2024

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Corporate Filing Menu

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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

(((H24000221002 3)))

The Loft Downtown II, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

No. 1000  
Ent. 1000

The Articles of Organization for this Limited Liability Company were filed on January 10, 2017 and assigned  
Florida document number L17000008092

This amendment is submitted to amend the following:  
B.

**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 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)

No. 1000

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

No. 1000  
No. 1000

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

City

Florida

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

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AMBR = Authorized Member

[illegible]

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26 JUN 27 AM 10:21

26-27-27 AM 10:27

RECEIVED  
STATE DEPT  
JAN 20 1955

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Dated: 6/26/2024 | 11:13 PDT

*Andreas Thomsen*

Signature of a member or authorized representative of a member

Pamela B. Hathaway

Typed or printed name of signer

((H24000221002 3))

**Filing Fee: \$25.00**