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Division of Corporations

Fax Number : (850)617-6383

From:

S

Account Name : COMPUTERSHARE Account Number: 110432003053 Phone : (561)694-8107

Fax Number

: (561)214-8442

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,,	**Enter the email address for this business entity to be used for fut	ure
Į.	്റ്റ് annual report mailings. Enter only one email address please.**	
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	<u> </u>	
	문항 LLC AMND/RESTATE/CORRECT OR M/MG RESIGN	
2424	<u> </u>	
	LIBERTY SQUARE PHASE NINE, LLC	

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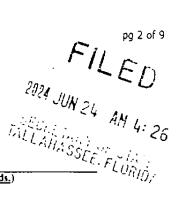
K. SALY

JUN 25 2024

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Liberty Square Phase Nine, LLC

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

nda do	ocument number L17000177521		
amei	ndment is submitted to amend the following:		
lf am	ending name, enter the new name of the limited lis	ability company here:	
new na	me must be distinguishable and contain the words "Limited Lia	bility Company," the designation "	"LLC" or the abbreviation "L.L.C."
er nev	w principal offices address, if applicable:		
ncipa	l office address MUST BE A STREET ADDRESS)		
a r a a a	r mailing address if applicables		
er nev	w mailing address, if applicable:		
ilina	addragg MAV RE A POST OFFICE ROY)		
If amo	address MAY BE A POST OFFICE BOX) ending the registered agent and/or registered office slor the new registered office address here:		nter the name of the new regi
If amo	ending the registered agent and/or registered offic	e address on our records, <u>en</u>	nter the name of the new reg
If amo	ending the registered agent and/or registered offic d/or the new registered office address here: Name of New Registered Agent:	e address on our records, <u>en</u> Enter Florida street oa	nter the name of the new reg
If amo	ending the registered agent and/or registered offic d/or the new registered office address here: Name of New Registered Agent:	e address on our records, <u>en</u> Enter Florida street oa	nter the name of the new reg
If amo	ending the registered agent and/or registered offic d/or the new registered office address here: Name of New Registered Agent:	e address on our records, <u>en</u> Enter Florida street oa	nter the name of the new reg

If amending Authorized Person(s) authorized to manage	e, enter the title, name, and address of each person being added
or removed from our records:	FILED
MGR = Manager AMBR = Authorized Member	2024 JUN 24 AN
AMDR - Additionized member	TO SUBJECT 44 4: 27

MGR =	Manager	
AMBR =	Authorized	Member

Title	Name	Address TALLAHASSASS	Type of Action
Nesident	Jon Paul Perez	Address 2850 Tigertail Ave. SUITE 800	ND, ■Add
		Miami, FL 33133	□Remove
			□Change
Vice President	Matthew J. Allen	2850 Tigertail Ave, SUITE 800	🗐 Add
		Miami, FL 33133	□Remove
			Change
Vice <u>Presiden</u> t	Alberto Milo, Jr.	2850 Tigertail Ave, SUITE 800	≅ Add
		Miami, FL 33133	□Remove
			□Change
Vice President	Ben Gerber	2850 Tigertail Ave, SUITE 800	= Add
		Miami, FL 33133	□Remove
Vice President	(□Change
Treasurer/ Secretary	Tony Del Pozzo	2850 Tigertail Ave. SUITE 800	🗏 Add
1.		Miami, FL 33133	□Remove
J.			
,. 			🗆 Add
: 3		·	□Remove
			□Change

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