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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195
REFERENCE : 627490 4500665
AUTHORIZATION : Spelle man
REFERENCE : 627490 4500665  AUTHORIZATION : Spelle Mar  COST LIMIT : \$55.00
ORDER DATE : April 19, 2022
ORDER TIME : 2:26 PM
ORDER NO. : 627490-210
CUSTOMER NO: 4500665
DOMESTIC AMENDMENT FILING
NAME: PF CUTLER BAY, LLC
EFFECTIVE DATE:
XX _ ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
XX CERTIFIED COPY  PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING

EXAMINER'S INITIALS:

CONTACT PERSON: Alexxis Weiland -- EXT#

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PF Cutler Bo	•		
( <u>Name of the Limited Liability Compan</u> (A Florida Limited Lia	y <u>as it now appears on our record</u> ability Company)		
The Articles of Organization for this Limited Liability Company v Florida document number L17000248650	vere filed on 12/05/2017	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	ity company here:		
GFP Cutler Bay, LLC		<b>(~1</b>	
The new name must be distinguishable and contain the words "Limited Liabilit	y 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)			
		:-	
Enter new mailing address, if applicable:		<u>.</u>	
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office adapted and/or the new registered office address here:  Name of New Registered Agent:	ldress on our records, <u>enter t</u>	he name of the new registered	
New Registered Office Address:	Enter Florida street address		
-	Flo	rida	
New Registered Agent's Signature, if changing Registered Agent:	· •	,	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a company has been notified in writing of this change.	erformance of my duties, an ovided for in Chapter 605, F	d I am familiar with and F.S. Or, if this document is	

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>	Name	Address	Type of Action
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ective date, if other than the date o effective date is listed, the date must be spec	f filing:	1. 651	(optional)	(05.07)
e: If the date inserted in this block doe	s not meet the applicable	ate of filing or more than 90 e statutory filing requirer	nents, this date will n	ot be listed a
ument's effective date on the Departme	ent of State's records.			
cord specifies a delayed effective date, to filed.	out not an effective time	, at 12:04 a.m. on the ear	ner of: (b) The 90th	i day after th
ed April 18	2022			
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Filing Fee: \$25.00

Typed or printed name of signee