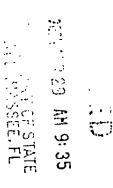
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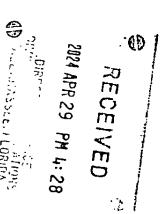
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800428437658





C//25/21/



To: Department Of State, Division Of Corporations

From: Amanda Miller

Ext:

Date: 04/29/24 Order #: 1495429-1

Re: MB MIXED USE INVESTMENT HOLDINGS MEMBER I, LLC

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Amount to be deducted from our State Account: \$25.00 - FL State Account Number:

120000000195

AUTH

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MB MIXED USE IN	VESTMENT HOLDINGS MEMBER I, LLC	
(Name of the Limited I (A)	iability Company as it now appears on our record. Florida Limited Liability Company)	5.)
The Articles of Organization for this Limited Liabi	lity Company were filed on 12/17/2018	and assigned
Florida document number 1.18000287475	·	
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of th	e limited liability company here:	
MB MIXED USE INVESTMENT HOLDINGS MEM	•	
The new name must be distinguishable and contain the words	s "Limited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicabl	e;	
(Principal office address MUST BE A STREET A	(DDRESS)	77171 = 1111
		ms o
		FF 35
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	<u> </u>
B. If amending the registered agent and/or registered and/or the new registered office address h		the name of the new registered
		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flo	rida
_	City	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 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
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			□Remove
			□ Add
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fective date, if other than the date in effective date is listed, the date must be spote: If the date inserted in this block document's effective date on the Department.	ies not meet the appli	cable statutory fil	(op) more than 90 days aft ling requirements, th	tional) er filing.) Pursuant to his date will not be	605.0207 listed as
ecord specifies a delayed effective date, is filed.	, but not an effective	time, at 12:01 a.n	n, on the earlier of:	(b) The 90th day	after the
ted April 16	2024	·			
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Signal	of a member or aud	orized representati	ve of a member	-	-

CSC AMEND-12098