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Division of Corporations



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To:

Division of Corporations

Pax Number : (850)617-6383

From:

Account Name : KATZ BARRON Account Number : 072627002473 : (305)856-2444 Phone

Fax Number : (305)860-2588

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SOUTH FLORIDA BUSINESS PLAZA ASSOCIATES, LLC

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COVER LETTER

TO: Registration S Division of Co				
South Flo	rida Business Plaza Associates	LLC		
SURJECT:	Name of Lit	nited Liability Company		
The enclosed Articles of	f Amendment and fee(s) are su	bmitted for filing.		
Please return all corresp	ondence concerning this matter	to the following;		
	Charles J. Duffy, Esq.			
		Nume of Person		
	Katz Barron			
		Finu/Company		
	100 NE Third Ave., Suite	280 .		
	****	Address	•	
	Fort Lauderdale, FL 3330	1		- 1
		City/State and Zip Code		
	cid@katzbarron.com		***************************************	. 4
Park Andrews		to be used for future annual report not tica	tion)	
For further information of	concerning this matter, please e	ALI:		
Charles J. Duffy, Esq.		954 522-3636 at ()		_
Name o	of Person	Area Code Daytime T	dephone Number	
Enclosed is a check for 6	he following amount:			
☎ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Cl \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing For Certificate of \$ Certified Copy (additional copy is	datus &
Regisu	ING ADDRESS: ration Section on of Corporations	STREET/COURIER Registration Section Division of Corporation		

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Taliahassee, FL 32301

H190001775243

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SOUTH FLORIDA BUSINESS PLAZA ASSOCIAT	ES, LLC	
(Same of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.)	
The Articles of Organization for this Limited Liability Company	were filed on 04/02/2019	and assigned
Florida document number L19000091196		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Commany," the designation "LLC" or t	the abbreviation "L.L.C.
The state of the s		5
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>
		<u> </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
maning manes will be it to the term		• •
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	fice address on our records, en	iter the name of the new
registered agent migror the new registered office address next	<u>.</u>	
	· ·	
Name of New Registered Agent:		
New Registered Office Address:	•	
Enter Florida str a st addrass		
	Florida	
	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre	es to act in this canacin. I fortha	e norga to namelo soleh et -
provisions of all studies relative to the proper and complete	verformance of my duties, and I d	agree to comply with the am familiar with and
accept the obligations of my position as registered agent as p	provided for in Chapter 605, F.S.	Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

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.

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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

Title	Name	<u>Address</u>	Type of Action
MQR	JENNIFER FERNANDEZ	1560 SAWGRASS CORPORATE PARKWAY, 4TH FLOOR	□ Add
			≡ Remove
	٠.	·	Change
MGR	BRENDA YATES	1560 SAWGRASS CORPORATE PARKWAY, 4TH FLOOR	
		,	
			O Remove
			Change C
			□ Remove DC
		,	Chánge E
			bbA Cl
			☐ Remove
		·	□ Change
			□ Remove
			Change
			
			П Rеточе
			D Change

D. If amending any other information, outer change(s) here: (Attach additional sheets, if necessary.)

Ιf

This limited liability company is a Manager managed limited liability company.			
			
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(if on effective Note: If t	thate, if other than the date of filing:	
	is specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of this day after the record is filed.	:
Dated	Signatur of a member or authorized representative of a member	
	Charles J. Duffy, Esq., Authorized Representative	
	Typed or printed name of signee	

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Filing Fee: \$25.00