Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000255600 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : MARKO & MAGOLNICK, P.A.

Account Number : I20050000186 Phone : (305)285-2000 : (305)285-5555

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

Email Address: corporateservices@mm-pa.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SV 1431 SUGAR HILL GP, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

T. LEMIEUX

HelpJUL 2 5 2023

Electronic Filing Menu Corporate Filing Menu

(((H23000255600 3)))

ARTICLES OF AMENDMENT TO:

SV 1431 Sugar Hill GP, LLC (Name of the Limited Lightlity Com (A Florida Limited	OF •	•		
(Name of the Limited Liability Com (A Florida Limited		• •		
(Name of the Limited Liability Com (A Florida Limited				
	nany as it now appears an	Aur records)		
	Limbility Company)	ngi regurus.)		
The Articles of Organization for this Limited Liability Compar	y were filed on 05/28/2	019	and assig	zned
Plorida document number 1.19000142263				,
his amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lin	bility company here:			
he new name must be distinguishable and contain the words "Limited Link	vility Company," the designs	stion"LLC" or the r	ubreviation "L.L.	C."
nter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADDRESS)	· · · · · · · · · · · · · · · · · · ·			
			-	
nter new mailing address, if applicable:				
Mulling address MAY BE A POST OFFICE BOX)				
		5	•	
. If amending the registered agent and/or registered office	address on our record	s, enter the nan	ne of the new r	egiste
tent and/or the new registered office address here:			· ==	
			- T	
Name of New Registered Agent:				
New Registered Office Address:			P	C.
	Enter Florida stro	eet oddress		
		, Florida	S	
_ 	Clry		Zip Code	
w Registered Agent's Signature, if changing Registered Agent:	•			

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

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 (((H23000255600 3)))

Title	Name	Address	Type of Action
MGR	Jonathan P. Vilma	3861 Park Ave, Miami, FL 33133	□ Add
			≅Remove
			□ Change
MGR	SAM VIL LLC	3861 Park Avenuc, Miami, FL 33133	🗏 Add
			©Remove
			🖸 Add
			Remove
			Change
			□ Add
			Remove
			Change
			🖸 Add
			CRemove
			Change
			Remove
			GChange

(((H23000255600 3)))

(((H23000255600 3)))

			<u> </u>	
				
				
·				
				
				
				
				
Effective date, if other than to (If an effective date is listed, the date is Note: If the date inserted in this document's effective date on the	block does not meet the app	licable statutory milling for	(optional) nan 90 days after filing.) Pursuuu guirements, this date will not	t to 603.0207 (3); be listed as the
he record specifies a delayed effectord is filed.	tive date, but not an effective	e time, at 12:01 a.m. on th	e earlier of: (b) The 90th d	ay after the
July 2 I	2023	<u></u>		
Jonathan Vile	на			
Jamathan Vilnus (Jul 21, 2023)	Signature of a member or as	ithorized representative of a	meinber	

Filing Fee: \$25.00

(((H23000255600 3)))