10/24/23, 10:31 AM

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Division of Corporations

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From:

Account Name : COMPUTERSHARE Account Number: 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FL P18 LLC

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Electronic Filing Menu Corporate Filing Menu

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FL PI8 LLC	·t		
(Name of the Limited Liability (A Florida	y Company as it now appears on our records. Limited Liability Company)		
The Articles of Organization for this Limited Liability Co Florida document number <u>L19000284325</u>	ompany were filed on 11/14/2019	and assigned	d
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ted liability company here:		
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	***		
(Principal office address MUST BE A STREET ADDRE	ESS)		
	<del></del>		
Enter new mailing address, if applicable:	-		—
(Mailing address MAY BE A POST OFFICE BOX)	<del></del>		
B. If amending the registered agent and/or registered	office address on our records, enter th		<u>istere</u>
agent and/or the new registered office address here:		173 f	
		<del>-</del> 5	
Name of New Registered Agent:	·	15)	
New Registered Office Address:		بات روب بات	
New Registered Office Address.	Enter Florida street address		
	C1	1— 1 <u>2</u> 2	
<del></del>	, Flor	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>	Name	Address	Type of Action
Managing Member	BASILE, L.C.	259 Bill France Blvd	
		Daytona Beach, FL 32114	Remove
			□Change
MGR	AAC FL Holdings LLC. by Lara Coraci Basile as Manager	259 Bill France Blvd	
		Daytona Beach, FL 32114	□ Remove
			□Change
		***************************************	DAdd
			□ Remove
			□ Change
			□Remove
			□Change
			□Remove
			□ Change
			□Add
			□Remove
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	<del></del>			<del></del>
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	<del></del>			
				<del> </del>
				<del></del>
Effective date, if other than the date if an effective date is listed, the date must be	ate of filing:	rior to data of filing or m	on than 90 days after filing t	Pursuant to 605 0707
Note: If the date inserted in this block	k does not meet the app	olicable statutory filing	g requirements, this date	will not be listed as
document's effective date on the Depa	artment of State's recor	ds.		
e record specifies a delayed effective d rd is filed.	late, but not an effectiv	e time, at 12:01 a.m. o	on the earlier of: (b) The	: 90th day after the
	2023			
October 23rd				
Dated October 23rd	,	<u></u>		
	7	1at		
Dated October 23rd Signature Signatu	gnature of a member or a		of a member	

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