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To:

Division of Corporations

Fax Number : (850)617-6383

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. **

Email	Address	:			

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FL P52 LLC

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Page Count	04
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Help

OC1 52 5053

T. LEMEUX

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	?	4	
FL P52 LLC		-1	
	opears on our records.)		_
(Name of the Limited Liability Company as it now a (A Florida Limited Liability Comp	any)		
	11/14/2019	,	
The Articles of Organization for this Limited Liability Company were filed o	n	and	assigned
Florida document number £19000284390			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability compa	ny here:		
The new name must be distinguishable and contain the words "Limited Liability Company."	The decimation "I I C" or I		
the new name must be distinguishable and contain the words. Elimited Elability Company,	the designation CCC of the	ie abbrevianor	1 L, L, C,
Enter new principal offices address, if applicable:		<u>-</u>	
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:			
-			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office address on o	our records, <u>enter the r</u>	iame of the	new register
agent and/or the new registered office address here:			8 93
			یز
Name of New Registered Agent:			N)
			- -
New Registered Office Address:	r:		T-9 (-
h,nic	r Florida street address	<u>~</u> 1	=
	, Florida	. <u> </u>	 ເກ
City		Zip Co	ntes :

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
Ambassador	ANTHONY CORACI, BY L.C. BASILE, EXEC., E/O	51 DEFOREST AVENUE	
		SUMMIT, FL 07901	■Remove
			□Change
MGR	AAC FL Holdings ELC, by Lara Coraci Basile as Manager	259 Bill France Blvd	■Add
		Daytona Beach, FL 32114	Remove
			Change
			□Add
			Remove
			□Change
			⊡Add
			□Remove
			☐ Change
			ClAdd
			□Remove
			☐ Change
			□Add
			Remove
			□Change

		
		<u>.</u> _
	date of filing: be specific and cannot be prior to date of filing or more than 90 day ck does not meet the applicable statutory filing requirement partment of State's records.	
record specifies a delayed effective d is filed.	date, but not an effective time, at 12:01 a.m. on the earlier	of: (b) The 90th day after the
October 23rd	2023	
October 23rd October 23rd	12023 12 Aut	
October 23rd	2023 A Country iignature of a member or authorized representative of a member	

Filing Fee: \$25.00