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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)694-1639

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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN YOURS AND MAYAN @ SAINT AUGUSTINE LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Yours And Mayan @ Saint Augustine LLC				
(Name of the Limited Liability Com (A Florida Limited	pany as it now appears on o d Liability Company)	ur records.)		
The Articles of Organization for this Limited Liability Compari Florida document number <u>L20000127882</u> .	ny were filed on 5/14/202	20	and assi	gned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lis	bility company here:			
Yours And Mayan At Saint Augustine LLC				
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designa	tion "LLC" or the abbrev	iation "L.L	C."
Enter new principal offices address, if applicable:				·
(Principal office address MUST BE A STREET ADDRESS)				
				
Enter new mailing address, if applicable:		TALL	2020	
(Mailing address MAY BE A POST OFFICE BOX)		25 737 117 111	T.	TI
(Mutting dualess MAT DE ATOST OTTTCE BOA)	, , , , , , , , , , , , , , , , , , , 	7) F.	 ;	In agen
		7 f 1.		
B. If amending the registered agent and/or registered offic	e address on our record	ls, enter the name of	the new	registe
agent and/or the new registered office address here:			i i	\cup
		and the second second	-13	
Name of New Registered Agent:		M - 1212 - 1112	.	
New Registered Office Address:				. <u>-</u>
_	Enter Florida str	reet address		
		, Florida		
	City		Zip Code	
New Registered Agent's Signature, if changing Registered Agen	<u>it:</u>			
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	te performance of my d s provided for in Chapt	luties, and I am fam ter 605, F.S. Or, if t	iliar with his docui	h and ment is
If Ct	nanging Registered Agent. S	ignature of New Registe	red Agent	

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being addor removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			Remove
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		<u> </u>	☐ Change
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Effective date, if other than the date of filing: [If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02071. Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the rid is filled. Dated May 18 2020 Signature of a member or authorized representative of a member Lauren Underwood, Attorney-in-Fact				<u></u>
Effective date, if other than the date of filing: (optional) If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02071 More: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ord is filed. Dated May 18 2020 Signature of a member or authorized representative of a member				
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Signature of a member or authorized representative of a member	Dated May 18	2020		
Lauren Underwood, Attorney-in-Fact		Signature of a member or authorize	d representative of a member	
	Lauran Hadamusud	Attorney in Fact		

Filing Fee: \$25.00