

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)214-8442

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Email	Address:			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DCH REALTY FLORIDA, LLC

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Electronic Filing Menu Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DCH REALTY FLORIDA, LLC	7 6
(<u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appears on our records.) d Liability Company)
The Articles of Organization for this Limited Liability Compar Florida document number <u>L20000240415</u> .	ny were filed on 08/18/2020 and assigned 5
This amendment is submitted to amend the following:	nending name, enter the new name of the limited liability company here: name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." ew principal offices address, if applicable: al office address MUST BE A STREET ADDRESS) ew mailing address, if applicable: a address MAY BE A POST OFFICE BOX; nending the registered agent and/or registered office address on our records, enter the name of the new registered address here:
A. If amending name, enter the new name of the limited lin	ability company here:
The new name must be distinguishable and contain the words "Limited Lia	ibility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(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 offic agent and/or the new registered office address here:	e address on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida

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.

City

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
AMBR	VICA REALTY GROUP LLC	8111 N BAYSHORE DR	🖸 Add
		MIAMI, FL 33138	
			☐ Change
			□Remove
			☐ Change
			□Add
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<u></u>			□Add
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		120-88 64411 44-7-4			
					AM 10:
					
n effectiv ete: If th	date, if other than the date of the date is listed, the date must be speci- tic date inserted in this block does as effective date on the Department	fic and cannot be prior to not meet the applicat	date of filing or more to le statutory filing re	(optional han 90 days after filing quirements, this date	(.) Pursuant to 605.020
ecord sp is filed.	ecifies a delayed effective date, b	ut not an effective tim	e, at 12:01 a.m. on t	ne earlier of: (b) Ti	he 90th day after the
ted	November, 10th	2021	121)	
	Signatur	e of a member or author	zed epresentative of	member	