

9/30/2020

Division of Corporations

Florida Department of State

Division of Corporations

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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : GASSMAN, CROTTY & DENICOLA, P.A.

Account Number : 07535000514

Phone : (727)442-1200

Fax Number : (727)443-5829

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

Email Address: _____

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
EAST SHORE CORPORATE PROPERTY, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

1-120000340630

EAST SHORE CORPORATE PROPERTY, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 09/15/2020 and assigned
Florida document number 620000290011.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

419 EAST SHORE DRIVE

(Principal office address MUST BE A STREET ADDRESS)

CLEARWATER, FL 33767

Enter new mailing address, if applicable:

419 EAST SHORE DRIVE

(Mailing address MAY BE A POST OFFICE BOX)

CLEARWATER, FL 33767

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

PAUL A. GIONIS, ESQ.

New Registered Office Address:

1299 MAIN STREET, STE C

Enter Florida street address

DUNEDIN

City

Florida 34698

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.

Paul A. Gionis
If Changing Registered Agent: Signature of New Registered Agent

120000340630

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

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<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	1981 MANAGEMENT, LLC	419 EAST SHORE DRIVE	<input type="checkbox"/> Add
		CLEARWATER, FL 33767	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. 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 605.0207 (3)(b) **Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If 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 record is filed.

Dated September 30, 2020

Signature of a member or authorized representative of a member

ALAN S. GASSMAN, Authorized Representative

Typed or printed name of signee