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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

: (561)214-8442

Fax Number

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

Email	Address:	<u>ں شتہ</u>

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MHP FL IX GP, LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$55.00

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T. LEMIEUX

MAR 23 2022

## **COVER LETTER**

Division of Corporations			
MHP FL 12	X GP, LLC		
SUBJECT:	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Diana Serra		
		Name of Person	
	Corporate Creations Intern	ational	
		Firm/Company	<del></del>
	801 US Highway		
		Address	·····
	North Palm Beach, FL 334	08	
		City/State and Zip Code	
	E-mail address: (	to be used for future annual report notifica	tion)
For further information e	oncerning this matter, please ca	all:	
Diana Serra		561 649-8107	
Name o	t Person	at ()	clephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address		<u>Street Address:</u> Registration Section	ND.
Registration Section Division of Corporations		Division of Corpo	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MHP FL IX GP, LEC				
(Name of the Limited Liability Company (A Florida Limited Lia	ras it now appears on our records.) bility Company)			
The Articles of Organization for this Limited Liability Company w Florida document number L20000337919	ere filed on 11/03/2020	and a	issignee	ឋ
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabili	ty company here:			
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the al	obreviation "	LLC."	
Enter new principal offices address, if applicable:	·			
(Principal office address MUST BE A STREET ADDRESS)		<del></del>		
		··		
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
		•		
B. If amending the registered agent and/or registered office ad	dress on our records, enter the nam	e of the n	ew reg	isteret
agent and/or the new registered office address here:				
Name of New Registered Agent:		; <del>;.                                   </del>		
New Registered Office Address:	ř		2022	
	Enter Florida street address	<u> </u>	X	
	Florida	<u>. ;; : : : : : : : : : : : : : : : : : :</u>	.xo _ <b>.xa</b>	<u></u> !
	City	≓#p Code	۰, ۸	LED
New Registered Agent's Signature, if changing Registered Agent:		. '≍: '≍:	2	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office accompany has been notified in writing of this change.	erformance of my duties, and I am j ovided for in Chapter 605, F.S. Or.	anमिद्धः ॥ if this doc	ci <b>in</b> en	d

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

Title	<u>Name</u>	Address	Type of Action
MBR	Patrick McDowell, William	601 Brickell Key Drive, # 700, Miami FL 33131	□Add
		, <del> </del>	Remove
			Change
MGR	William Patrick McDowell	601 Brickell Key Drive, # 700, Miami FL 33131	🗆 Add
			Change
			□Add
			□Remove
			□Change
			🖸 Add
			□ Remove
			Change
			DAdd
			□Remove
			□Change
			□Add
			□Remove
			= 43

15612148442

Filing Fee: \$25.00

Typed of printed name of signee