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Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SERBER & ASSOCIATES, P.A.

Account Number : **I20000000083**Phone : (305)932-6262
Fax Number : (305)933-9393

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

Email Address: info@Sexhex law firm com

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ARENA SUNSET, LLC

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APPROVEL

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ARENA SUNSET, LLC		•
(Name of the Limited Liability Compa (A Florida Limited	uny as it now appears (Liability Company)	on our records.)
he Articles of Organization for this Limited Liability Company lorida document number L20000366393	wers filed on 12/	02/2020 and assigned
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited lish	ility company here	;
he new name must be distinguishable and end with the words "Limited Liab	ility Company," the de	ignation "LLC" or the abbraviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
		· · · · · · · · · · · · · · · · · · ·
oter new mailing address, if applicable:		
failing address MAY BE A POST OFFICE BOX)		
. If amending the registered agent and/or registered of existered agent and/or the new registered office address bere	fice address on o	ur records, enter the name of the
Name of New Registered Agent:	.	
New Registered Office Address:	Enter Florida	street address
		, Florida
	City	Zip Code
ew Registered Agent's Signature, if changing Registered Agent:		

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 Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

MGR = Manager

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

AMBR = A	authorized Member		
<u>Title</u>	<u> Name</u>	<u>Address</u>	Type of Action
MGR	LUKOWIECKI LEV, DEBORA	16425 COLLINS AVE., APT 2114	<u></u> □ Add
		SUNNY ISLES BEACH	E Remove
		FL 33160	
MGR	REICHBERG, YAEL	16425 COLLINS AVE., APT 1414	■ Add
		SUNNY ISLES BEACH	□ Remove
		FL 33160	
			_p.Add
			_ Remove
		<u> </u>	.
			DAA []
			_CI-Remove
			_
			_D Add
		·	_D Reibove
			-
			_D Add
			_C Remove

D. If amending any other information, enter ch	bange(s) here:	(Attach additional sheets, if necessary.)	
			_
			•
			
	·· 		ı
E. Effective date, if other than the date of filing (The effective date must be specific, cannot be prior to date	e of receipt or filed	(optional) date and cannot be more than 90 days after	
the date this document is filed by the Florida Department	_		
Dated August 8th	2023		
_ Aprealize			
		ed representative of a member	
REICHBERG YAEL	-		
	Typod or printed a	ame of signee	

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