

## Florida Department of State

Division of Corporations  
Electronic Filing Cover Sheet**L200003106393** 4-8623

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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@serberlawfirm.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

## ARENA SUNSET, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

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2023 AUG 16 PM 3:20

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA2023 AUG 16 AM 7:40  
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AUG 17 2023

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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**ARENA SUNSET, 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 12/02/2020 and assigned Florida document number L20000366393.

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

16425 Collins Ave., APT 1414

(Principal office address MUST BE A STREET ADDRESS)

Sunny Isles Beach

FL 33160

Enter new mailing address, if applicable:

16425 Collins Ave., APT 1414

(Mailing address MAY BE A POST OFFICE BOX)

Sunny Isles Beach

FL 33160

**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:

New Registered Office Address:

Enter Florida street address

Florida

City

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.*

If Changing Registered Agent, Signature of New Registered Agent

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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:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	LUKOWIECKI LEV, MAX	16425 COLLINS AVE., APT 2114	<input type="checkbox"/> Add
		SUNNY ISLES BEACH	<input checked="" type="checkbox"/> Remove
		FL 33160	
MGR	LUKOWIECKI LEV, MAX	16425 Collins Ave., APT 1414	<input checked="" type="checkbox"/> Add
		Sunny Isles Beach	<input type="checkbox"/> Remove
		FL 33160	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

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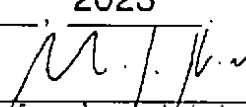
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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated August 15th

2023

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

MAX LUKOWIECKI LEV

\_\_\_\_\_  
Typed or printed name of signee