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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : VCORP SERVICES, LLC

Account Number : I20080000067 Phone : (845) 425-0077 : (845)818-3588 Fax Number

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

Emaıl	Address:			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ESMD001 LLC

Certificate of Status Certified Copy Page Count 04Estimated Charge S25.00

OCT 27 2021

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Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ESMD001 LLC		
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.) Liability Company)	11VIS
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L20000396193}{L20000396193}$.	y were filed on 12/28/2020	and assigned of Con-
This amendment is submitted to amend the following:		· · · · · · · · · · · · · · · · · · ·
A. If amending name, enter the new name of the limited liab	pility company here:	京、1 7
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "ELC" or the abbi	eviation "L.L.C."
Enter new principal offices address, if applicable:	7795 Fisher Island Drive	
(Principal office address MUST BE A STREET ADDRESS)	Miami Beach, FL 33109	
Enter new mailing address, if applicable:	7795 Fisher Island Drive	
(Mailing address MAY BE A POST OFFICE BOX) Miami Beach, FL 33109		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name	of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Florida	
	Cuy	Zıp 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.

To: +18506176383 Page: 3 of 4 2021-10-26 20:23:51 GMT 18886118813 From: Vcorp Services, LLC

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	Name	Address	Type of Action
 			□ Add
			Remove
			□Change
			☐Remove
			☐ Change
			□Add
			☐ Remove
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(If an effe <u>Note:</u>	re date, if other than the date of filing:	Pursuant to 605,0207 (3 rill not be listed as the
	specifies a delayed effective date, but not an effective time, at 12:01 a million the earlier of: (b). The d.	90th day after the
he record ord is tile		
	October 26 Signature of a member or authorized representative of a member	