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Ta:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FRANK, WEINBERG, BLACK, P.L.

Account Number : 12004000083

Phone Fax Number

: (954)474-8000 : (954)474-9850

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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 21123-25 E DIXIE HWY, LLC

Certificate of Status	0
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

21123-25 E DIXIE HWY,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 01-25-2021 _ and assigned Florida document number L21000046233 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: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 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 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
AMBR	Joffrey A. Rothstin	4030 Sheridan Street, Suite A	
		Hollywood, FL 33021	———— □Add ———— ■Remove
AMBR	Jeffrey Rothstein	4030 Sheridan Street, Suite A	Change
		Sheridan suces, Suite A	= Add
		Hollywood, FL 33021	□Remove
			□Change
			ORemove
			□ Change
			□Remove
			□Change
-			
			□Remove
			□Change
			□ Add
			□Remove
	H210	0001191363	□Change

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	y other information, enter change(s) here: (Allach additional sheets, if necessary.)
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ffective date, if other	T then the day of the
en affective date is listed,	the date must be specific and a next be seen to the date of things.
cument's effective de	the date of filing: 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), and in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
	the on the Department of State's records.
Ponnel	-
is filed.	of offective date, but not an effective time, at 12.00
·- • •	od offective date, but not an effective time, at 12:01 a.m. on the carlier of: (b) The 90th day after the
ed March 24,	
eu	2021
	1000
	Signature of a member or authorized representative of a member
Juffley Rathers	vin
Jeffrey Rothste	Typed or printed name of signee