

8/18/2021

Division of Corporations

L210000240822753

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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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: Domagnucci@gmail.com

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

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

LANDVERRY 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 02/04/2021 and assigned
Florida document number L21000062753

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:

1909 Tyler Street, Suite 502

(Principal office address MUST BE A STREET ADDRESS)

Hollywood, FL 33020

Enter new mailing address, if applicable:

1909 Tyler Street, Suite 502

(Mailing address MAY BE A POST OFFICE BOX)

Hollywood, FL 33020

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:

American Brokers Management, LLC

New Registered Office Address:

1909 Tyler Street, Suite 502

Enter Florida street address

Hollywood

City

, Florida 33020

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

PLEASE CHANGE ADDRESS FOR ALL MANAGER:

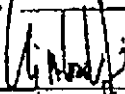
1909 Tyler Street, Suite 502

Hollywood, FL 33020

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 June 17

2021



Signature of a member or authorized representative of a member

Virginia Landolfi

Typed or printed name of signer

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CLERK OF THE
SOLICITOR GENERAL
FLORIDA