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| PICK-UP WAIT MAIL |
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| Special Instructions to Filing Officer: |
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| TO: Registration Se Division of Cor | | | |
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| | NG & REAL ESTATE LLC | | |
| SUBJECT: | Name of Lim | ited Liability Company | |
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please return all correspo | ondence concerning this matter | to the following: | |
| | Lisa Wennick | | |
| | | Name of Person | |
| | | Firm/Company | |
| | 1320 Estuary Trail | | 2021 SEP |
| | | Address | P T |
| | Delray Beach, FL 33483 | | 7 7 |
| | lisa.wennick@elliman.com | City/State and Zip Code | OF STATE (fication) |
| | | to be used for future annual report noti | fication) |
| | oncerning this matter, please c | au: 843 329 9930 | |
| Lisa Wennick | of Person | at () | e Telephone Number |
| Name o | a Person | Atea Code Daytiin | e receptione retitioes |
| Enclosed is a check for the | he following amount: | | |
| S25.00 Filing Fee | ■ \$30.00 Filing Fee & Certificate of Status | S55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| Mailing Addres | | Street Address: | ction |
| Registration Section Division of Corporations | | Registration Se Division of Cor | |
| P.O. Box 632 | • | . The Centre of T | Tallahassee |
| Tallahassee, | FL 32314 | 2415 N. Monro | e Street, Suite 810 |

Tallahassee, FL 32303

TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| any as it now appears on our r Liability Company) | ecords.) |
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| were filed on <u>02/08/2021</u> | and assigned |
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| lity Company," the designation | "LLC" or the abbreviation "L.L.C." |
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| 1320 Estuary Trail | SSEE, ST |
| Delray Beach, FL | 02 ATE |
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| Delray Beach, FL 33483 | A O |
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| F | |
| Enter Florida street e | , Florida |
| , i | were filed on 02/08/2021 bility company here: lity Company," the designation 1320 Estuary Trail Delray Beach, FL 33483 |

New Registered Agent's Signature, if changing Registered Agent:

CIMIC LIBRARY OF DEAL CONCERNING

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

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

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
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| ective date, if other than the effective date is listed, the date in | he date of filing | cannot be prior to | date of filing or r | nore than 90 da | (optional | l) g.) Pursi | uant 10 605.02 |
| te: If the date inserted in this nument's effective date on the | block does not m | icet the applicab | le statutory fili | ng requiremen | its, this dat | e will r | ot be listed: |
| ament's circuit and on the | Department of o | | | | | | |
| cord specifies a delayed effects filed. | tive date, but not | an effective tim | e, at 12:01 a.m. | on the earlier | of: (b) 1 | he 90th | i day after th |
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| ed August 31 | · | 2021 | -· | | | | |
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Typed or printed name of signee