(((H21000089201 3)))



H210000892013ABCX

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107

Fax Number : (561)214-8442

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

Email	Address:	
-------	----------	--

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PRH 1717 N FLAGLER DRIVE HOLDINGS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

MAR - 5 2021

M. SOLOMON

Electronic Filing Menu Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company	y were filed on 03/01/2021	and assigned	
		200 300 500	
Florida document number L21000089858			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	bility company here:		
1717 N Flagler Drive Holdings, LLC			
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "ELC" o	r the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		<u>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</u>	
(Principal office address MUST BE A STREET ADDRESS)		. 23	
Enter new mailing address, if applicable:			
2.		50 =	
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter th</u>	e name of the new regi	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	, Flori	ida	

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 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
			□Add
			Remove
			Change
			□Add
			□Remove
			□Change
***********			ÓAdd 🞘
			Add MAR ARE DO D Add D Add
			DChange
			□Remove
			□Change
			DAdd
			□ Remove
			□Change
			□Add
			Remove
			Con A Se 13 Se 1 Se

□ Change

				
				
				
				~~
				-
				
				_
				2021 I
			::- ::-	_XX
			95.	+ ;
			1	<u></u>
			<u> </u>	—⊕ ———————————————————————————————————
				_7
Effective date, if other than the d	late of filing:	A. C.C.	(optional)	 505 0707 (3Vb
Note: If the date inserted in this bloc document's effective date on the Dep	ck does not meet the applica	ble statutory filing require	ments, this date will not be l	isted as the
the record specifies a delayed effective cord is filed.			rifer of: (b) The 90th day a	fler the
Dated March 4	. 2021	- pel		

Filing Fee: \$25.00