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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, LLC

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MAR - 5 2021

M. SOLOMON

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Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records bility Company)	F)
The Articles of Organization for this Limited Liability Company w	ere filed on 03/01/2021	and assigned
Torida document number L21000089869		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liabili	ty company here:	
717 N Flagler Drive Venture, LLC		
he new name must be distinguishable and contain the words "Limited Liability	v 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)		21
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inter new mailing address, if applicable:		74. 🥌
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maning dadress MAT INC (C. 1007 01.1122.2019		3 [±] : 0
Enter new mailing address, if applicable: (Muiling address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office adapted and/or the new registered office address here:	ldress on our records, <u>enter</u>	754 5 574 0 574 0
Name of New Registered Agent:		
New Registered Office Address:	P. P. 1	
	Enter Florida street addres.	Y.
	, Flo	orida
	City	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.

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	Name	Address	Type of Action
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Effective date, if other than the fun effective date is listed, the date me Note: If the date inserted in this bedocument's effective date on the l	llock does not me	annot be prior to det the applicable	ate of filing or mor	option e than 90 days after fil	al) ing.) Pursuant to 605 ate will not be liste	.0207 (3) ed as the
e record specifies a delayed effecti rd is filed.	ve date, but not a	n effective time.	at 12:01 a.m. or	the earlier of: (b)	The 90th day after	r the
		2021	_			
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