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	(Requestor's Name)
	(Adcress)
	(Address)
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	(Business Entity Name)
	(Document Number)
· Copies	Certificates of Status
.:) Instructions to	Filing Officer
	LUCENE
	J. HORNE
	MAR - 3 2023
	<u></u>

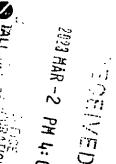
Office Use Only



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SCHOOL CANADA

2023 HAR -2 AH 10: 17





CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

Phone: 850-558-1500						
ACCOUNT NO. : I2000000195						
REFERENCE : 543359 5156901						
AUTHORIZATION: Spelbelle man						
COST LIMIT : \$25.00						
ORDER DATE: March 2, 2023						
ORDER TIME : 1:51 PM						
ORDER NO. : 543359-005						
CUSTOMER NO: 5156901						
DOMESTIC AMENDMENT FILING NAME: 508 COCONUT LLC EFFECTIVE DATE:						
XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING						
CONTACT PERSON: Eyliena Baker EXT#						

EXAMINER'S INITIALS:

DocuSign Envelope ID: 90871247-09D1-4976-8072-C51AD3919173 **COVER LETTER** TO: Registration Section **Division of Corporations** 508 Coconut LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Glenn Giordano Name of Person Firm/Company 101 NE 3RD AVE STE 1500 Address FT LAUDERDALE, FLORIDA, 33301 City/State and Zip Code glenng@allstarmg.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Glenn Giordano Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ☐ \$25.00 Filing Fee □ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status Certificate of Status & Certified Copy

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

(additional copy is enclosed)

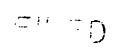
Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Certified Copy

(additional copy is enclosed)

DocuSign Envelope ID: 90B71247-09D1-4976-B072-C51AD3919173

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



(1)

2023 HAR -2 AH ID: 17

508 Coconut LLC		SECRETARY & SECRETARY
(Name of the Lim	ited Liability Company as it now appears (A Florida Limited Liability Company)	on our records AHASCEE
The Articles of Organization for this Limited I Florida document number L21000145210	Liability Company were filed on Apr	
This amendment is submitted to amend the fol	lowing:	
A. If amending name, <u>enter the new name o</u>	of the limited liability company her	<u>e</u> :
508 Coconut LLC		
The new name must be distinguishable and contain the	words "Limited Liability Company," the des	signation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli (Principal office address MUST BE A STRE)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	<u></u>	
B. If amending the registered agent and/or agent and/or the new registered office addre		ords, <u>enter the name of the new register</u>
Name of New Registered Agent:	Glenn Giordano	
New Registered Office Address:	101 NE 3RD AVE STE 1500	
	Enter Florid	la street address
	FT LAUDERDALE	, Florida
	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.

Genn Gordano

If Changing Registered Agent, Signature of New Registered Agent

DocuSign Envelope ID: 90B71247-09D1-4976-B072-C51AD3919173
It amenuing Authorized rerson(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>	<u>Address</u>	Type of Action
AMBR	Edward Rudiger Jr.	101 NE 3RD AVE STE 1500	□Add
		FT LAUDERDALE, FLORIDA, 33301	■Remove
			□Change
MGR	Glenn Giordano	101 NE 3RD AVE STE 1500	🗆 Add
		FT LAUDERDALE, FLORIDA, 33301	□Remove
			■ Change
AMBR	Gina Giordano	101 NE 3RD AVE STE 1500	■Add
		FT LAUDERDALE, FLORIDA, 33301	□Remove
			□Change
			□ Add
			Remove
			□Change
			□Add
			□Remove
			Change
		<u> </u>	□Add
			□Remove
			□Change

. If amending any other informati	on, enter thange(o) never	The second secon	icection, y.,

<u>.</u>			
			
			
			<u> </u>
Effective date, if other than the date must Mote: If the date inserted in this block document's effective date on the Department.	be specific and cannot be prior to ck does not meet the applicable	date of filing or more than 90 days a	
ne record specifies a delayed effective ord is filed.	date, but not an effective time	e, at 12:01 a.m. on the earlier of	(b) The 90th day after the
Pebruary 22	2023		
DocuSigned by:	·	•	
Qun Gord	ano		
9394CDF8C32B469S	ignature of a member or authoriz	ed representative of a member	
Glenn Giordano			
	Typed or printed r	name of signee	

Filing Fee: \$25.00