

L21000174458

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

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Account Name : LEOPOLD KORN & LEOPOLD, P.A.
Account Number : I20010000025
Phone : (786)899-2235
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Email Address: kleopold@leopoldkorn.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
LJSM MABLETON 2, LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LJSM MABLETON 2, 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 April 14, 2021 and assigned
Florida document number 121600174458.

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 contain the words "Limited Liability 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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PALM BEACH COUNTY, FLORIDA

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

New Registered Office Address

Enter Florida street address.

_____, 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.

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

AMMR = Authorized Member

Title	Name	Address	Type of Action
MGR	GREGG GOLDBERG	9748 BLUE ISLE BAY	☐ Add
		PARKLAND, FL 33076	☒ Remove
			☐ Change
AP	JANA SIGARS-MALINA	9748 BLUE ISLE BAY	☐ Add
		PARKLAND, FL 33076	☒ Remove
			☐ Change
MGR	JANA SIGARS-MALINA	9748 BLUE ISLE BAY	☒ Add
		PARKLAND, FL 33076	☐ Remove
			☐ Change
AP	GREGG GOLDBERG	9748 BLUE ISLE BAY	☒ Add
		PARKLAND, FL 33076	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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CLERK OF DISTRICT COURT

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STATE
TALLAHASSEE, FLORIDA

2024年12月17日