4/27/22, 12:32 PM

Division of Corporations



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Division of Corporations

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SANTA BARBARA SOCIAL CLUB LLC

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Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SANTA BARBARA SOCIAL CI	LUB LLC		
(Name of the Lin	nited Liability Company as it now appea (A Florida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited	Liability Company were filed on 04	/30/2021	and assigned
Florida document number L21000201641	<u> </u>		
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited liability company h	<u>ere</u> :	
The new name must be distinguishable and contain the	words "Limited Liability Company," the o	designation "LLC" or the at	bbreviation "L.L.C."
Enter new principal offices address, if appl	icable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		
		·	
		,	
		•	
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE	<u> </u>	-	
		<u> </u>	
		•	
B. If amending the registered agent and/or	registered office address on our r	acords, enter the nam	ne of the new registers
agent and/or the new registered office addr	ess here:		022
Name of New Registered Agent:	FRANK A. SUAREZ CEDENO		APR 2
New Registered Office Address:	2135 SANTA BARBARA BLVD	SUITE# 106-108	
*	Enter Flor	rida street address	3 3-00;
	CAPE CORAL	, Florida ^{33'}	99 7
	City	. —	ρ C

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.

Changing Registered Agent, Stemante of New Registered Agent

_____ □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>	Name	Address	Type of Action
MGR	BORIS AVILA	2135 SANTA BARBARA BLVD	□Add
		SUITE # 106-108	= n
		CAPE CORAL, FL 33991	
AMBR	FRANK A. SUAREZ CEDENO	2135 SANTA BARBARA BLVD	■Add
		SUITE # 106-108	
		CAPE CORAL, FL 33991	
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
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Effective date, if other than t (If an effective date is listed, the date r Note: If the date inserted in this document's effective date on the	nust be specific and o block does not me	cannot be prior to eet the applical	date of filing or roble statutory filin	(opti nore than 90 days afte ng requirements, thi	r filing.) Pursuant to 605.	.0207 (:d as t
ne record specifies a delayed effec ord is filed.	tive date, but not a	an effective tin	ne, at 12:01 a.m.	on the earlier of: (I	o) The 90th day after	the
Dated 04/26		2022				
Abs	,	 	. . •			
	Signature of a m	ember or author	ized representativ	e of a member		