L2/000217743

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COVER LETTER

TO: Registration S Division of Co			
	aum West, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	David Von Derau		
		Name of Person	
	McGuire Development		
	-	Firm/Company	
	455 Cayuga Road		
		Address	
	Buffalo, New York 14225		
		City/State and Zip Code	
	david@mcg-dev.com E-mail address: (to be used for future annual report notification)	
For further information	concerning this matter, please c	all:	
Brian Askey		716 908-8644	
Name	of Person	Area Code Daytime Telephor	ne Number
Enclosed is a check for t	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ : Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration Division of O P.O. Box 63: Tallahassee.	Section Corporations 27	Street Address: Registration Section Division of Corporatior The Centre of Tallahass 2415 N. Monroe Street, Tallahassee, FL 32303	see ''

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

MDC Atrium West, LLC			
(Name of the L	imited Liability Company as it now (A Florida Limited Liability Com	appears on our records.) ipany)	
The Articles of Organization for this Limite	d Liability Company were filed	on May 10, 2021	and assigned
Florida document number L21000217743			
This amendment is submitted to amend the	following:		
A. If amending name, <u>enter the new nam</u>	e of the limited liability compa	any here:	
he new name must be distinguishable and contain the	he words "Limited Liability Company.	," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if app	plicable:		
Principal office address MUST BE A STR	EET ADDRESS)		
			<u>.</u>
Enter new mailing address, if applicable:			
<u>Mailing address MAY BE A POST OFFIC</u>	<u></u>		
			
3. If amending the registered agent and/o	or registered office address on	our records ontor the nam	o of the new regis
gent and/or the new registered office add		our records, enter the nam	e or the new regis
Name of New Registered Agent:			
	2901 W. Cypress Creek Roa	ad, Suite 104	w.3
New Registered Office Address:			
New Registered Office Address:	Ent	ter Florida street address	•
New Registered Office Address:	Ft. Lauderdale City	ter Florida street address Florida ³³³	09

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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AR	David Von Derau	455 Cayuga Road, Suite 100	≣Add
		Buffalo, NY 14225	
			□Change
AR	Brian Askey	2901 W. Cypress Creek Roas, Suite 104	□Add
		Ft. Lauderdale, FL 33309	□Remove
			□ Change
AMBR	Francis J. McGuire	455 Cayuga Road, Suite 100	□Add
		Buffalo, NY 14225	□Remove
		·	■ Change
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E. Effective date, if other than t	the date of filing:	(optio	nal) Jing A Pursugar to 605 0207 (3 9)
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable	statutory filing requirements, this	date will not be listed as the
f the record specifies a delayed effectecord is filed.	ctive date, but not an effective time,	at 12:01 a.m. on the earlier of: (b)	The 90th day after the
N4 0	2024		:
Dated May 9	. 2024		÷ ,
_	Signature of a member or authorized	d representative of a member	

Filing Fee: \$25.00

Typed or printed name of signee

				
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reffective date is listed, the date r te: If the date inserted in this	must be specific and cannot	be prior to date of filing	or more than 90 days after	filing.) Pursuant to 605.020
cument's effective date on the			rining requirements, tims	date will not be fisted a
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- Jem	Sizzation - C	or authorized represent	antica and a management	; `′ `\

Filing Fee: \$25.00