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(Re	equestor's Name)	<u> </u>
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## **COVER LETTER**

Tallahassee, FL 32314

	Registration S Division of Co			
SUBJEC	9511 BOO	A GARDENS CIRCLE SOUT	TH, LLC	
<b>*****</b>		Name of Lin	nited Liability Company	
The enclo	sed Articles of	f Amendment and fee(s) are sul	bmitted for filing.	
Please ret	urn all corresp	ondence concerning this matter	r to the following:	
		LOPEZ, MYDA		
			Name of Person	
			Firm/Company	
		9817 MONTPELLIER DE	UVE	
			Address	
		DELRAY BEACH, FL 33	446	
			City/State and Zip Code	
		mydalisalopez@hotmail.co		
		E-mail address: (	(to be used for future annual report notification)	
For further	r information o	concerning this matter, please of	all:	
LOPEZ, N	MYDA		646 704-1834	
,	Name o	f Person	Area Code Daytime Telephone Number	<del></del>
Enclosed i	s a check for th	he following amount:		
■ \$25.00	) Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified (	of Status &
	lailing Addres		Street Address:	
	egistration S		Registration Section	
	ivision of C .O. Box 632		Division of Corporations The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

741 SET 29 AM 5: 49

#### 9511 BOCA GARDENS CIRCLE SOUTH, LLC

(Name of the Limited Liability Company as it now appears on our records.)

•	(A Florida Limited Liability Comp	any)
The Articles of Organization for this Limited Florida document number L21000229012		n 05/13/2021 and assigned
This amendment is submitted to amend the fo	ollowing:	
A. If amending name, enter the new name	of the limited liability compar	ny here:
The new name must be distinguishable and contain the	words "Limited Liability Company,"	the designation "LLC" or the abbreviation "L.IC."
Enter new principal offices address, if app	icable:	
(Principal office address MUST BE A STRE	EET ADDRESS)	
Enter new mailing address, if applicable:  (Mailing address MAX BE A POST OFFICE	E BOX)	
B. If amending the registered agent and/or agent and/or the new registered office addr	registered office address on o ess bere:	ur records, <u>enter the name of the new registere</u>
Name of New Registered Agent:	BEN-HAMO LAW, PLLC	
New Registered Office Address:	2701 NW BOCA RATON BI	· · · · · · · · · · · · · · · · · · ·
	Enter	Florida street address
	BOCA RATON	, Florida <sup>33431</sup>
	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 AMBR = Authorized Member

Title	Name	Address 3+21 S.1-29 Mil 6:49	Type of Action
MGR	LOPEZ, MYDA	9817 MONTPELLIER DRIVE	□Add
		DELRAY BEACH, FL 33446	= Remove
			Change
MGR	ISLAND SAND, LLC	9817 MONTPELLIER DRIVE	<b>=</b> Add
		DELRAY BEACH, FL 33446	□Remove
			□Change
<del></del> -			□Add
			□Remove
		<del></del>	Change
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tive date, if other than the date of fill fective date is listed, the date must be specific. If the date inserted in this block does not nent's effective date on the Department of	and cannot be prior to date of the transfer of the applicable statu	filing or more than 90 da tory filing requiremen	(optional) sys after filing.) Pursuant to 69 nts, this date will not be lis
rd specifies a delayed effective date, but r led.	ot an effective time, at 12	:01 a.m. on the earlies	r of: (b) The 90th day af
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September 22	, <u>wal</u>		
September 22  Mylling Signature of	, <u>wall</u>		

Filing Fee: \$25.00