Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : MARKO & MAGOLNICK, P.A.

Account Number : 120050000186 Phone : (305)285-2000 Fax Number : (305)285-5555

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SV UNITY MANAGEMENT, LLC

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Page Count	03
Estimated Charge	\$25.00

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Electronic Filing Menu

Corporate Filing Menu

Help

To: 8506176383 -

From: 3052855555

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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SV UNITY MANAGEMENT, 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 May 18, 2021 and assigned Florida document number L21000229558	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	171 27:
SV WEST GROVE, LLC	4'm ⊘C
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC"	,~ } } }
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	r .
	-
Enter new mailing address, if applicable:	_
*	
(Mailing address MAY BE A POST OFFICE BOX)	-
The difference of the party regists	red
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:	rea
agent undry! the new registered writee was new	
Name of New Registered Agent:	_
New Registered Office Address: Enter Florida street address	-
. Florida	
Cuy Zip Code	-
New Registered Agent's Signature, if changing Registered Agent:	
	tha
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with 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

_ 🗆 Remove

Change

(((H21000296640 3)))

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 = N $AMBR = A$	lanager authorized Member		
<u>Title</u>	Name	Address	Type of Action
			□Remove
			☐ Change
			□Add
			SECRETARY DIVISION OF CO.
			Add Sport Start
			□ Change
			□Remove
			Change
			□Add
		<u> </u>	□Remove
			☐ Change

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From: 3052855555

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 Note: If the date inserted in t 	n the date of filing: the must be specific and cannot be problem block does not meet the appoint the Department of State's reconstitution.	ior to date of filing or mu licable statutory filing	(optional) ore than 90 days after filing.) g requirements, this date v	Pursuant to 605,0207 (vill not be listed as th
the record specifies a delayed of cord is filed.	Tective date, but not an effective	stime, at 12:01 a.m. c	on the earlier of: (b) The	90th day after the
Dated August 5	. 2021		200 arks	
<u> </u>	Signature of a member or au	thorized representative	of a member	
David Everett Ma				
LYMVIN LACION IVIA		inted name of signee		

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