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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of	Corporations			
	mingo At Marco, LLC			
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles	s of Amendment and fee(s) are sub	omitted for filing.		
Please return all corre	espondence concerning this matter	to the following:		
	Mark F. Moss			
		Name of Person		•
	The Law Office of Mark F	7. Moss		
	 -	Firm/Company		-
	301 W. Bay Street, Suite 1	457		2021 .:=.(.:=.(
		Address		SEF
	Jacksonville, Florida 3220	2		2021 SEP 24 PK 2: 13
		City/State and Zip Code		
	MArk@markmosslaw.com			7.9
	E-mail address: (to be used for future annual report noti	fication)	$\frac{1}{2}$ $\frac{1}{2}$
For further information	on concerning this matter, please c	all:		
Mark F. Moss		904 329-7242 at ()		
Nar	me of Person	Area Code Daytim	e Telephone Number	r
Enclosed is a check f	or the following amount:			
□ \$25.00 Filing Fe	e S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ite of Status &
<u>Mailing Ad</u> Registration	dress: on Section	<u>Street Address:</u> Registration Se	etion	
Division of	of Corporations	Division of Cor	rporations	
P O Roy	6327	The Centre of 1	Fallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Flamingo At	Marco LLC	
(Name of the Limited Liability Com (A Florida Limite	npany as it now appears on our records. ed Liability Company)	.)
The Articles of Organization for this Limited Liability Compa Florida document number <u>12/1000 263579</u>	ny were filed on <u>4/67/21</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and contain the words "Limited Li-	ability 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)		AC 22 TT
		SEP 24
		7.7
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		2
		ω
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	ce address on our records, <u>enter t</u>	he name of the new registered
Name of New Registered Agent:		_
New Registered Office Address:	Form Florida and 12	
	Enter Florida street address	
	, Flo	rida Zip Code
	cu)	rap Cone

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Remove
			□ Change
			□Add
			□Remove
			□Change
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		No. No.	1 Add
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New Mailing Address: 1208 \	Vashington Street, Unit 2N, Hoboken, N	IJ 07 030	
			
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ctive date, if other than the effective date is listed, the date must example. If the date inserted in this blument's effective date on the De	be specific and cannot be prior to date of fill the does not meet the applicable statutor	ng or more than 90 days after fil	ing.) Pursuant to 605.0
ord specifies a delayed effective filed.	date, but not an effective time, at 12:01	a.m. on the earlier of: (b)	The 90th day after t
d September 2,	. 2021		

Filing Fee: \$25.00