

11/17/21, 12:31 PM

Division of Corporations

Florida Department of State
Division of Corporations
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Division of Corporations
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From:

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Phone : (888)491-1120
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
ISLA WPB LLC

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Corporate Filing Menu

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NOV 18 2021

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H210004250733
ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
2021 NOV 17 PM 5:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ISLA WPB 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 06/07/2021 and assigned
Florida document number 1.21000264321.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

NOT APPLICABLE

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

NOT APPLICABLE

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

NOT APPLICABLE

(Mailing address MAY BE A POST OFFICE BOX)

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:

Name of New Registered Agent:

NOT APPLICABLE

New Registered Office Address:

Enter Florida street address

, Florida

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

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H210004250135

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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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Parched Hospitality Group	292 BEDFORD AVE	<input type="checkbox"/> Add
		NEW YORK, NY 11249	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	BARRY DRY	1500 CLARE AVENUE	<input checked="" type="checkbox"/> Add
		WEST PALM BEACH, FL 33401	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DAVID ORR	1500 CLARE AVENUE	<input checked="" type="checkbox"/> Add
		WEST PALM BEACH, FL 33401	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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 GEORGE J. BROWN
 TALLAHASSEE, FLORIDA

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U.S. DISTRICT COURT
SOUTHERD DISTRICT OF FLORIDA
TALLAHASSEE

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Dated NOVEMBER 17 2021

DocuSigned by:
[Signature]
830 8 1072050

EP307 1072056497

Signature of a member or authorized representative of a member

BARRY DRY

Typed or printed name of signee

H21000425073 3

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