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COVER LETTER

TO:	Reg Divi	istration Se sion of Cor	ection porations	;		
SUBJEC	т.	Patrizia NY	°C 2 LI.C			
SOBJEC		<u> </u>	Name of Li	mited Liability Company		
			Amendment and fee(s) are sundence concerning this matte			
		an correspon	Lance Denha, Esq	r to the following:		
				Name of Person		
			Law Offices of Lance De	nha, PA		
				Firm/Company		
			495 Brickell Avenue, #37	710		
				Address	- -	
			Miami, FL 33131			
			Ldenha@lancedenhawlaw.			
For further	r inf	ormation co.	ncerning this matter, please c	(to be used for future annual real):	report notification)	
Lance De					3-6183	
		Name of	Person	Area Code	Daytime Telepho	one Number
Enclosed is	sac	heck for the	following amount:			
€ \$25.00) Fil	ing 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 Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF 21 CCT -5 FH 3: 12

PATRIZIA NYC 2 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 JUNE 10, 2021 and assigned florida document number L21000270649

This amendment is submitted to amend the following:

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

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)

Enter new mailing address, if 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:
New Registered Office Address:

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.

City

Enter Florida street address

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

AMBR = Authorized Member			- 54 3: 12		
<u>Title</u>	<u>Name</u>	Address	21 007 -5 PH 3: 12	Type of Action	
MGR	EMERSON INSFRAN	1544 SE 3RE	OCT, DEERFIELD BEACH,FL 33441		
				□Remove	
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	ition, enter change(s) here: (Attach additional sheets, if necessary.)
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fective date, if other than the one offective date is listed, the date must	be specific and cannot be prior to date of filing or more than 90 days of a Gling via
ote. It the date miseried in this bloom	OCK does not meet the applicable statutory filing requirements, this data will not be listed as a
cument's effective date on the Dep	partment of State's records.
ecord specifies a delayed effective is filed.	date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
is filed.	
, OCTOBER 1	2021
ted	
	_/Q
	Signature of a member or authorized representative of a member
LANCE DENHA, ESQ. A	ATTORNEY REPRESENTING PATRIZIA NYC 2 LLC
	Typed or printed name of signee

Filing Fee: \$25.00