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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : STEARNS WEAVER MILLER WEISSLER ALHADER

Account Number : 120060000135 : (305)789-3200 Phone : {305}789-4137 Fax Number

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

Email Address: msbutters@Butters.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MB COUNTYLINE LLC

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6/15/2021

https://efile.sunbiz.org/scripts/efilcovr.exe

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	OF	7 ~
		1021 SEC
MB COUNTYLINE LLC		<u></u>
(Name of the Limited Liability (A Florida Li	Company as it now appears on our records.) mited Liability Company)	N.I.
		- AR O [T
The Articles of Organization for this Limited Liability Con	npany were filed on June 14, 2021	and assigned
Florida document number <u>L21000276180</u>		
This amendment is submitted to amend the following:		: 21
A. If amending name, enter the new name of the limited	d liability company here:	
The new name must be distinguishable and contain the words "Limited	d Liability Company." the designation "LLC" or the a	ubbreviation "L.L.C."
Enter new principal offices address, if applicable:	,,	
(Principal office address MUST BE A STREET ADDRES		
(Frincipal Office angless in part de Astreel Addres	<u></u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<del></del>
		<u> </u>
B. If amending the registered agent and/or registered o	Wice address on our records, enter the Du	me of the new registered
b. It sincountly the registered agent should registered by agent and/or the new registered office address here:	Thee address on our records, enter the har	ne wi tate them registeres
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Plealde	
	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered A	Agent:	
I hereby accept the appointment as registered agent an provisions of all statutes relative to the proper and com accept the obligations of my position as registered agent being filed to merely reflect a change in the registered company has been notified in writing of this change.	nd agree to act in this capacity. I further a inplete performance of my duties, and I am int as provided for in Chapter 605, F.S. Or	familiar with and r, if this document is

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>	Name	Address	Type of Action
MGR	Malcom Butters	6820 Lyons Technology Circle	□Add
		Suite 100	□ Remove
		Coconut Creek, FL 33073	
MGR	Mark Butters	6820 Lyons Technology Circle	
		Suite 100	Remove
		Coconut Creek, FL 33071	🖫 Change
			□ Add
			Remove
			Change
			DAdd
			□ Remove
		<u>.                                    </u>	Change
			□ Add
			□ Remove
			□Change
		·	□ Remove
			Change

AMTIÇ	Le.V - Management		
The Co	mpany shall be manager-managed. The names and addresses of the two initial managers are		
	Butters, 6820 Lyons Technology Circle, Suits 100: Coconút Creek, FL 33(173		
Mark B	utters, 6820 Lyons Technology Circle, Suite 100, Coconut Creek, FL 33073		
******			
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an effective d	e, if other than the date of filing:  the is listed, the date must be specific and cannot be printed date of filing or more than 90 days after filing.) Pandate inserted in this block does not meet the applicable statutory filing requirements, this date will	summe to 605.0.	207 ras
ocument's el	Tective date on the Department of State's records.		
as as all an oat	fies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90	th day after t	he
d is Med.	nes a delayed effective data, but not all effective limb, at 12.01 2.111 on the carrier of (c)	#1 <b>42</b> 9 ******	
June	15th 2021)		
Dated			
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