121000328036

(Requ	uestor's Name)	
(Addr	ess)	
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(City/:	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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(Docu	iment Number))
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195	
REFERENCE : 919093 7965870	
AUTHORIZATION: Sipulo Eleman	
COST LIMIT : \$ 25.00	
ORDER DATE : July 20, 2021	
ORDER TIME : 1:40 PM	
ORDER NO. : 919093-005	
CUSTOMER NO: 7965870	
	• - -
DOMESTIC AMENDMENT FILING	
NAME: 13TH FLOOR ADLER BARRY, LLC	
EFFECTIVE DATE:	
XX ARTICLES OF AMENDMENT	
RESTATED ARTICLES OF INCORPORATION	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY	
XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING	
CONTACT PERSON: Alexxis Weiland EXT# 61592	

EXAMINER'S INITIALS:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

13th Floor Adler Barry, LLC		
(Name of the Limited Liability Compan (A Florida Limited Lia	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company with Florida document number <u>L21000328036</u> .	vere filed on 07/19/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ity company here:	
Adler 13th Floor Barry, LLC		
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC" or the al	obreviation "L.L.C."
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 ad	dress on our records, enter the nan	ie of the new register
agent and/or the new registered office address here:		· •
Name of New Registered Agent:		
New Registered Office Address:		·
The Fidures.	Enter Florida street address	
	, Florida <u></u>	——————————————————————————————————————
	City:	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree	to got in this amounts. I finishes an	man to annualy with t
provisions of all statutes relative to the proper and complete p		
accept the obligations of my position as registered agent as pr	ovided for in Chapter 605, F.S. Or,	if this document is
being filed to merely reflect a change in the registered office a	ddress, I hereby confirm that the lir	nited 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>	<u>Address</u>	Type of Action
			□Add
			□Remove
			□Change
		· · · · · · · · · · · · · · · · · · ·	□Add
			□Remove
			□Change
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			□Remove
			□ Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
Effec	tive date, if other than the date of filing:(optional)
lf an el : <u>Note</u>	Tective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as nent's effective date on the Department of State's records.
e reco ord is f	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the iled.
Dated	July 20 2021
	Signature of a member or authorized representative of a member
	Signature of a member of authorized representative of a member
	Arnaud Karsenti

Filing Fee: \$25.00