12/1/21, 12:58 PM

Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000438582 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ALLSTATE CORPORATE SERVICES CORP

Account Number : I20040000031 Phone : (800)906-9220 Fax Number : (800)906-9880

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

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

1560 MERIDIAN AVENUE #208, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$30.00

DEC = 3 2021

S. PRATHER

Electronic Filing Menu

Corporate Filing Menu

Help

(((H21000438582 3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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:	Yves A. Francois	
New Registered Office Address:	7845 Shalimar Street	
	Enter Florida street address	
	Miramar	, Florida ³³⁰²³
	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.

(((H21000438582 3)))

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

Title	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			ÖAdd
		·	□Remove
			☐ Change
			DAdd
			□Remove
			Change
			□Add
			□Remove
			Change
			□Add
			□ Pemove

(((H21000438582 3)))

D. If amen	ding any other information	on, enter change(s) l	here: (Attach additional si	heets, if necessary.)			
·							
					··		
			·	F-44-79.			
				·			
_		· · · · · · · · · · · · · · · · · · ·					
		 		 			
_		<u></u>					
					 		
(If an effect <u>Note:</u> If	e date, if other than the ditive date is listed, the date must be the date inserted in this blocate's effective date on the Dep	ix specific and cannot be p ik does not meet the ap	prior to date of filing or more that pplicable statutory filing requ	iirements, this date w	tursuant to 605.	.0207 (3) od as the)(b) c
f the record s ecord is filed	specifies a delayed effective of.	iate, but not an effectiv	ve time, at 12:01 a.m. on the	earlier of: (b) The	90th day after	the	
Dated _	OCTOBER 11	2021	<u></u> .		Σ _ο ς	20	
	Steven Weise				SEURE P ALLAHA	2021 OEC -2	
		gnature of a member or a	authorized representative of a m	nember	₹ii.}	C -2	FILED
	Steven Weiss	Tomacioni	printed name of signee		F 9	AM	