L21000372694

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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Co				
SJC Tropic SUBJECT:	cal Holdings 2, LLC			
	Name of Lin	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Amy Owen			
		Name of Person		
	Homrich Berg			
		Firm/Company		
	3835 PGA Blvd, Suite 307	7		
		Address		
	Palm Beach Gardens, FL 3	33410		
		City/State and Zip Code		
	amy.owen@homrichberg.c	om to be used for future annual report noti	The second second	
For further information of	e-mail address: (concerning this matter, please c		neation)	
Amy Owen		561 532-2742		
Name o	of Person	at () Area Code Daytim	e Telephone Number	
Enclosed is a check for the	he following amount:			
□ \$25.00 Filing 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 Addres		Street Address:		
Registration Section Division of Corporations		Registration Section Division of Corporations		
P.O. Box 6327			The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2023 SEP 11 AH 7: 36

SJC Tropical Holdings 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 Florida document number $\frac{L21000372694}{L21000372694}$.	were filed on and assigned and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	oility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3835 PGA Blvd
(Principal office uddress MUST BE A STREET ADDRESS)	Suite 307
	Palm Beach Gardens, FL 33410
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the name of the new register</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zip Code

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

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
MGR Ron Ho	Ron Hodgeman	3825 Edwards Rd	□Add
		#103	≣Remove
		Cincinnati, OH 45209	□Change
MGR Amy Owen	Amy Owen	3835 PGA Blvđ	■Add
		Suite 307	
		Palm Beach Gardens, FL 33410	□Change
MGR Stefan Cunco	Stefan Cunco	3835 PGA Blvd	
		Suite 307	□Remove
	Palm Beach Gardens, FL 33410		
			□ Add
			□ Remove
			□Change
			□ Add
			□Remove
			□ Change
	-		□ Add
		· 	□Remove
			□Change

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	<u> </u>
	
	6/15/2023
fan effec <u>Note:</u> H	e date, if other than the date of filing:
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 0th day after the record is filed.
Dated _	Sept 5 2023.
	On Own
	Signature of a member or authorized representative of a member
	Amy Owen
	Typed or printed name of signee

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Filing Fee: \$25.00