

Division of Corporations

12/15/23, 3:16 PM

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : SG PROJECT MANAGEMENT LLC
Account Number : I20220000151
Phone : (754)226-4414
Fax Number : (954)613-4136

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
SG FIVE REAL ESTATE LLC

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DEC 18 2023

T. LEMIEUX

RECEIVED

2023 DEC 15 PM 4:29

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2023 DEC 15 PM 1:15

ARTICLES OF AMENDMENT
TO
H230004281303 ARTICLES OF ORGANIZATION
OF

NORTHVERIALESTATELLC

(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 08/27/2021 and assigned Florida document number 121000385154

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 "L.L.C."

Enter new principal offices address, if applicable:

2030 NE 186TH RD - NORTH MIAMI BEACH - FL 33179

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

2030 NE 186TH RD - NORTH MIAMI BEACH - FL 33179

(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:

Enter Florida street address

City, Florida 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.

If Changing Registered Agent, Signature of New Registered Agent

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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>	<u>Type of Action</u>
MGR	SD PROJECT MANAGEMENT LLC	552 PALM DRIVE HALLANDALE, FL 33009	☐ Add
			☒ Remove
			☐ Change
MGR	STICHEL, ROBERTO	552 PALM DRIVE HALLANDALE, FL 33009	☐ Add
			☒ Remove
			☐ Change
AMBR	ELIAS SOARES CARNUT REGO	220 NE 180TH RD - NORTH MIAMI BEACH - FL 33179	☒ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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