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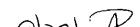
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COVER LETTER

TO:

Registration Section

Division of Corporations SAN REMO CLUB PROPERTIES LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: PETER HAGE Name of Person SAN REMO CLUB PROPERTIES LLC Firm/Company 338 RIVER ROAD Address ANDOVER, MA 01810 City/State and Zip Code PKHAGE@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: PETER HAGE Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ☐ \$25.00 Filing Fee **■** \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed). (additional copy is enclosed) Mailing Address: Street Address: Registration Section Registration Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street. Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SAN REMO CLUB PROPERTIES LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Unbility Company)

(A Florida Limited).	aantity Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000391449</u>	were filed on SEPT, IST 2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the ab	breviation "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 a agent and/or the new registered office address here:	ddress on our records, enter the nam	e of the new registered
Name of New Registered Agent:		
New Registered Office Address:		-
New Registered Office Address.	Enter Florida street address	
	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am j provided for in Chapter 605, F.S. Or,	familiar with and if this document is

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	PETER HAGE	338 RIVER ROAD, ANDOVER, MA 01810	■Add
			□ Remove
			□Change
			□ Add
			□Remove
			□Change
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Note: If a document a record s a d is filed.	l.		ut not an effecti	ive time, at 12:0	l a.m. on the ear	rlier of: (b)	The 90th day aft	er the
Note: 1f a document e record s rd is filed.			2021	ive time, at 12:0				er the