Division of Corporations Electronic Filing Cover Sheet

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.

(((H21000410824 3)))



H210004108243ABCW

| To: | | | | | |
|----------------|--|-------------------|---------------------------|------------------------|------|
| | Division of Corporations Fax Number : (850)617-6383 | | | | |
| | (400,021, 600, | | | | |
| From: | Account Name (CLORAL CORRORAL | T COLUTTONE I | 1.6 | | |
| | Account Name : GLOBAL CORPORAT Account Number : I20170000083 | E SOCUTIONS L | LC | | |
| | Phone : (305)775-1306 | | | | |
| | Fax Number : (305)775-1306 | | | | |
| ar | the email address for this busines | ne email addre | e used for ess please. | future ** ** ** ** *** | 7.87 |
| ar (0)(0) L | the email address for this busines noual report mailings. Enter only o mail Address: LC AMND/RESTATE/CORRECT WYNWOOD NOR | ct or M/M | ess please. | ** Washington Street | U |
| ar (0)(0) L | anual report mailings. Enter only o tail Address: LC AMND/RESTATE/CORRECT WYNWOOD NOR | ct or M/M | G RESIG | TALLOTTING SEEFELDRI | U |
| ar (0)(0) L | LC AMND/RESTATE/CORRECTION WYNWOOD NOR | ct or M/M | G RESIG | ** Washington Street | ET : |
| ar En | LC AMND/RESTATE/CORRECTION WYNWOOD NOR Certificate of Status | CT OR M/M TE, LLC | G RESIG | TALLOTTING SEEFELDRI | U |

1/4

TO:

COVER LETTER

| TO: Registration Division of C | Section orporations | | |
|---|---|---|---|
| WYNWO SUBJECT: | OOD NORTE, LLC | | |
| | Name of Li | mited Liability Company | |
| The enclosed Articles of | of Amendment and fee(s) are su | ibmitted for filing | |
| | nondence concerning this matte | | |
| | Alexis Bogomolni | | |
| | | Name of Person | |
| | ABH DEVELOPER GRO | OUP, LLC | |
| | | Firm/Company | · · · · · · · · · · · · · · · · · · · |
| | 2980 NE 207TH STREET | r, Suite 603 | |
| | | Address | |
| | Aventura, FL 33180 | | |
| | | City/State and Zip Code | <u> </u> |
| | alexisbogo99@gmail.com | | |
| | | to be used for future annual report not | ification) |
| For further information | concerning this matter, please o | all; | |
| Alexis Bogomolni | | 786 252-9459 | |
| Name o | of Person | at () | e Telephone Number |
| Enclosed is a check for t | he following amount: | | |
| □ \$25.00 Filing Fee | S30.00 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 Registration S Division of C | Section | Street Address: Registration Sec | |
| continue of C | o.porations | Division of Cor | poracions |

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

11 21 A A A A 11 A P 2/1

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| WYNWOOD NORTE, LLC | | | | |
|---|--|----------------------|-------------|-------------|
| (Name of the Limited Liability C (A Florida lim | ompany as it now appears on our records.) nited Liability Company) | | | |
| The Articles of Organization for this Limited Liability Com- Florida document number 1.21000402719 | pany were filed on 09/10/2021 | and as | ssigned | 1 |
| This amendment is submitted to amend the following: | | | | |
| A. If amending name, enter the new name of the limited | liability company here: | | | |
| The new came must be distinguishable and contain the words "Limited Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRES.) | | | | _ _ _ |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | | | |
| B. If amending the registered agent and/or registered off agent and/or the new registered office address here: | fice address on our records, enter the na | me of the ne | w regi | ster |
| Name of New Registered Agent: | | احت ط | r\2 | |
| New Registered Office Address: | | | 75 | |
| | Enter Florida street address Florida | 1.13 (39) (27) | AON | , |
| | , Florida | Ziń Code | | _ |

I hereby accept the appointment us 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.

New Registered Agent's Signature, If changing Registered Agent:

H21000 410824 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 |
|-------|------------------------------|------------------------------------|-----------------|
| MGR | ABH DEVELOPER GROUP, LLC | 2980 NE 207TH STREET, SUITE 603- B | |
| | | AVENTURA, FL 33180 | ≭ Remove |
| | | | □Change |
| MGR | Wyn North One Management LLC | 2980 NE 207TH STREET, SUITE 603- B | K ∕Add |
| | | AVENTURA, FL 33180 | □Remove |
| | | | ©Change |
| | | | □Add |
| | | | □ Remove |
| | | | □Change |
| | | | □Add |
| | | | □Remove |
| | | | ©Change |
| | · | | □ ∧dd |
| | | | □Remove |
| | | | ☐ Change |
| | | | □ Add |
| | | | □Remove |
| | | | □ Change |

| | | | <u> </u> | | | |
|---|---------------------------|---------------------|---------------------|------------------|---------------|------------------------------|
| | | | | - | <u> </u> | |
| | | | | | | |
| | | | | | | |
| - | | | | | _ | |
| | | | - | - | | |
| | | | | | | |
| | _ | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | · | | | |
| | | · | | | | |
| | | | | | | |
| | | | | | | |
| Effective date, if other than the dittan effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Day | ECONOCITIC BUILDANIAN PAR | DOOR 'A date of til | ing or more than 90 | (optional) | Pursuant to | 605.0207 |
| document's effective date on the Depi | artment of State's rec | ords. | ry maig requirer | nents, this date | wiii not be | listed as |
| | | | | | | |
| record specifies a delayed effective d | date, but not an effecti | ive time, at 12:0 | l a.m. on the ear. | lier of: (b) The | 90th day : | |
| e record specifies a delayed effective ded is filed. | | ive time, at 12:0 | t a.m. on the car. | lier of: (b) The | 90th day : | |
| e record specifies a delayed effective ded is filed. | date, but not an effecti | ive time, at 12:0 | l a.m. on the ear. | lier of: (b) The | 90th day: | |
| e record specifies a delayed effective d rd is filed. | | ive time, at 12:0 | t a.m. on the car | lier of: (b) The | 90th day: | 2001 NOV |
| e record specifies a delayed effective ded is filed. | | | | | TALLANDAS | after the 2001 NOV - 5 AH II |