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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : H & CO, LLP Account Number : I20150000089 Phone : (305)444-8800 Fax Number : (305)444-4010

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LLC AMND/RESTATE/CORRECT OR M/MG	RESIGN
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ARTICLES OF AMENDMENT

		TO r	•			
	ARTICLES O	F ORGANIZ	ATION			
Ţ	* *	OF ~	. 1	3	ð.	
	MISSO	N112201 LLC				
	(Name of the Limited Liability Co (A Florida Limi	mpany as it now ap	pears on our records.)		_	
	(A Florida Limi	ited Liability Compar	ny)			
The Articl	es of Organization for this Limited Liability Comp	any were filed on	09/13/2021	anc	d assign	ed
Florida do	cument number					
This amen	dment is submitted to amend the following:					
A. If ame	nding name, enter the new name of the limited	liability company	v here:			
	MB 2201, LLC					
The new nan	ne must be distinguishable and contain the words "Limited L	iability Company," t	he designation "LLC" or th	e abbreviatio	n "L.L.C	. 1*
Enter new	principal offices address, if applicable:					
(Principal	office address MUST BE A STREET ADDRESS	<u> </u>				
Enter new	mailing address, if applicable:					
(Mailing a	uddress MAY BE A POST OFFICE BOX)					
B. If ame	nding the registered agent and/or registered offi	ice address on ou	r records, enter the n	ame of the	new re	egistered
	or the new registered office address here:					
					2623	
<u>></u>	lame of New Registered Agent:			<u> </u>	<u> </u>	
ī	l D Constant				50	
7	lew Registered Office Address:	Enter	Florida street address			
			878 J.A.		FH	ξ,
		City	, Florida		ode	
Now Desir	tered Agent's Signature, if changing Registered Age			: :	ن -	
HEW REELS	tereo Agent a Signature, il Changing Registered Ag	2.00.				

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.

25-Jul-2023 15:11 Fax 13056000143 p.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 = Ms $AMBR = As$	nnager ithorized Memher		
<u>Title</u>	Name	Address	Type of Action
			□Add
			CRemove
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(If an et) <u>Note:</u>	ive date, if other than the date of filing: ective date is fisted, the date may be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605 0207 (3) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
he record ord is file	d specifies a delayed effective date, but not an effective time, at 12:01 a m on the earlier of: (b). The 90th day after the ed.
Dated _	06/24/2023
	Signature of a member of authorized representative of a member