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COVER LETTER

Tamiami P	iver MArina, LLC.				
CHD IECT.		ited Liability Company			
	Name of Lin	area Elaomiy 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:			
	Delaila Estefano				
	 -	Name of Person		_	
	Estefano Law, P.A.				
	 	Firm/Company		_	
	1600 Ponce De Leon Blvd	, Suite 804			
		Address		-	
	Coral Gables, Florida 3313	34			
		City/State and Zip Code	<u>-</u>	-	
	delaila@estefanolaw.com E-mail address: (to be used for future annual repo	rt notification)		
For further information c	oncerning this matter, please c		,	-	3.2) Time
Delaila Estefano		305 441-06	16		III - 5
Name o	f Person		aytime Telephone Numbe	r	5 P:
Enclosed is a check for the	he following amount:				3: 56
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) Certified	ite of Sta	tus &

TO:

Registration Section

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Tamiami River Marina, LLC		
(<u>Name of the Limited Liz</u> (A Flo	ability Company as it now appears on our records orida Limited Liability Company)	<u>;</u>)
The Articles of Organization for this Limited Liabilit	ty Company were filed on 10/18/2021	and assigned
Florida document number L21000453426		
This amendment is submitted to amend the following	7 :	
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:		
(Principal office address MUST BE A STREET AL	ODRESS)	
		787
		است سيم ن مسيم
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	<i>∪</i> 1 —
		<u>ੂੰ</u> ਹ
B. If amending the registered agent and/or registe agent and/or the new registered office address her		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
<u> </u>	Flo	
	City	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

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	Mazyer Hatami	700 Campana Ave	
		Coral Gables. Florida 33134	□Remove
			□Change
			□Add
			□Change
MGR	Delaila Estefano	1600 Ponce De Leon Blvd	□Add
		Suite 804, Coral Gables, Florida 33134	,≡Remove
			— Change
			ل Add
			CE Remove
			□ Change
			Remove
			□Change
			□Add
			□Remove
			□Change

Feetive date, if other than the date of filing; May 1, 2023 (optional) neffective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 tee: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a cument's effective date on the Department of State's records. coord 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 is filed.							- ·		-
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