Note: Please print this page and use it as a cover sheet. Type the fax audit oumber (shown below) on the top and bottom of all pages of the document.

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To:

Division of Componations

Fax Number : (850)617-6383

Account Name : STILES CORPORATION Account Number : 120020000320 : (954)627-9350 : (954)527-9393 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report railings, Enter only one exail address please.\*\*

Lynda.Watkins@Stiles.com

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PLANTATION MF QUATTRO, LLC

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T. LEMIEUX JUN 13 2022 Page: 2 of 5 ·

COVER LETTER

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TO: Registration S Division of Co			
PLANTA' SUBJECT:	TION MF QUATTRO, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	LYNDA WATKINS	Name of Person  N  Firm/Company  D STE 1200  Address  33301  City/State and Zip Code  ILES.COM  (to be used for future annual report notification)  calt:	
		Name of Person	<del>/</del>
	STILES CORPORATION	Estrect Address: Registration Section Division of Corporations	
		Firm/Company	adoc)  [] \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	201 E LAS OLAS BLVD	STE 1200	
	——————————————————————————————————————	Address	elephone Number  [1] \$60.00 Filing Fee,
	FT LAUDERDALE, FL 3	3301	
		City/State and Zip Code	<del></del>
	LYNDA, WATKINS@STII	LES.COM	
	E-mail address: (	to be used for future annual report notific	ation)
For further information of	concerning this matter, please c	all:	
LYNDA WATKINS		954 627-9350	
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he following amount:		
窗 \$25.00 Filing Fee	(2 \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
<u>Mailing Addre</u> Registration			ion
Division of C	Corporations	Division of Corpo	orations
P.O. Box 632			
Tallahassce,	FE 32314	2415 N. Monroe	Street, Suite 810

Tallahassee, FL 32303

PLANTATION MF QUATTRO, LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

(((H22000201093 3))) OF

19546279393

( <u>Name of the Limited Liability Company</u> (A Florida Limited Lia		
The Articles of Organization for this Limited Liability Company w	vere filed on 11/01/2021	and assigned
Florida document number £21000472577		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ty company here:	
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Muiling address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office ad agent and/or the new registered office address here:	dress on our records, <u>enter the n</u>	ame of the new registered
		<b>€</b> ₽
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	22
New Registered Office Address:		
	Enter Florida street address	80 × 1 m
	City Florida	- Zip Corde
New Registered Agent's Signature, if changing Registered Agent:	City	7 D
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office accompany has been notified in writing of this change.	erformance of my duties, and I w ovided for in Chapter 605, F.S. (	m familiar with and Or, if this document is
If Chabul	ng Registered Agent, Signature of New	Registered Agent

(((H22000201093 3)))

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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

Title	<u>Name</u>	Address	Type of Action
MGR	S-QUATTRO MF, LLC	201 E LAS OLAS BLVD	⊡Add
		STE 1200	
		FT. LAUDERDALE, FL 33301	
MGR	PLANTATION MF QUATTRO MANAGER		
		STE 1200	
		FT. LAUDERDALE. FL 33301	
			DAdd
			□Remove
			□Change
			□Add
			[ ι
			CChange
			∐Add
			©Remove
			☐ Change
			(JAdd
		A	Remove
			□ Change

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ctive date, if other than t	the date of filing: (optional) : must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 60:	
effective date is listed, the date in this	must be specific and cannot be prior to date of filing or more than 90 days after filing.) Persuant to 60: is block does not meet the applicable statutory filing requirements, this date will not be list	5.020 lod a
ment's effective date on the	ne Department of State's records.	
ord specifies a delayed effectiled.	ective date, but not an effective time, at 12:01 a.m. on the earlier of (b). The 90th day after	r the
med,		
d IUNE 9	2022	
· ·		
•,		
	Signature of a member or authorized representative of a member	