# L21000481853

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DEC 02 2021 I ALBRITTON CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 273022 8133117

AUTHORIZATION : Spulle

COST LIMIT : <sup>(</sup>\$ `25'.00

ORDER DATE: November 30, 2021

ORDER TIME : 10:53 AM

ORDER NO. : 273022-005

CUSTOMER NO: 8133117

### DOMESTIC AMENDMENT FILING

NAME: ROYAL PALM MULTIFAMILY LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER'S INITIALS:

(10)

## **COVER LETTER**

SUBJECT:		Royal Pa	ılm Multifamily LLC			
SOBJECT.	·	Name of Lir	mited Liability Company			
The enclose	d Articles of a	Amendment and fee(s) are sui	bmitted for filing.			
Please return	n all correspon	ndence concerning this matter	r to the following:			
			Solangel M. Bello			
Name of Person  Royal Palm Companies  Firm/Company  1010 NE 2nd Avenue	<del></del> -					
		Name of Person  Royal Palm Companies  Firm/Company  1010 NE 2nd Avenue  Address  Miami, FL 33232  City/State and Zip Code sol@rpcholdings.com  E-mail address: (to be used for future annual report notification)  mation concerning this matter, please call:  solangel M. Bello  Name of Person  The solution of Person  The				
			Firm/Company			
			1010 NE 2nd Avenue			
			Address			
			Miami, FL 33232			
			City/State and Zip Code	S60.00 Filing Fee, Certificate of Status & Certified Copy		
			-			
		E-mail address: (	to be used for future annual report	notification)		
For further in	nformation co	ncerning this matter, please c	all:			
	Solangel M	f. Bello		•		
	Name of	Person		time Telephone Number		
Enclosed is a	check for the	following amount:				
<b>■ \$25.00</b> F	iling Fee	<del>-</del>	Certified Copy	Certificate of Status & Certified Copy		
	ling Address:					
Registration Section Division of Corporations						
	Division of Corporations P.O. Box 6327		The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	AL PALM MULTIFAMILY LLC	် က
(Name of the Limited Li (A Fl	ability Company as it now appears on our records.) orida Limited Liability Company)	co
The Articles of Organization for this Limited Liability Florida document number L21000487853	ty Company were filed on November 16th, 2021	and assigned
This amendment is submitted to amend the following		
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 t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registe agent and/or the new registered office address here	red office address on our records, enter the n e:	ame of the new registere
Name of New Registered Agent:		
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 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>	Address	Type of Action
MGR	Kamil Salame	1010 NE 2nd Ave., Miami, FL 33232	≣Add
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Filing Fee: \$25.00