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From:

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN: 50 ST DEVELOPMENT LLC

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T. LEMIEUX

JUN 2 2 2022

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

50	EST DEVELOPMENT LLC		
(Name of the Limited Lia (A Fig.	hilly Company as it now appears on our records.) and a Limited Liability Company)		
The Articles of Organization for this Limited Liabilit	y Company were filed on 11/19:2021	and assig	gned
Florida document number L21000496737			
This amendment is submitted to amend the following	ų:		
A. If aniending name, enter the new name of the l	limited liability company here:		
The new name must be distinguishable and contain the words "	Limited Liability Company," the designation "LLC" or	the abbreviation "L.t.	.c."
Enter new principal offices address, if applicable:		<del></del>	<del></del> .
(Principal office address MUST BE A STREET AD	ODRESS)		
Enter new mailing address, if applicable:			
(Mailing uddress MAY BE A POST OFFICE BOX)			<del></del>
B. If amending the registered agent and/or register		name of the new	registerer
agent and/or the new registered office address her	<u>'e</u> :		· • • • • • • • • • • • • • • • • • • •
			$\supset$
Name of New Registered Agent:		<u> </u>	
New Registered Office Address:			
	Emer Florala street address	1 02 1 00 1 00 1 00 1 00 1 00 1 00 1 00	77
	Floric , Floric	<u> </u>	9
<del>-</del>	City	To Zin Gode	

## 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 Chopter 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 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	Name	Address	Type of Action
MEMBER	SEBASTIEN MEROVE-PIERRE	4701 N. MER!DIAN AVENUE #203	
		MIAMI BEACH, FL 33140	□Rεπονε
			\ \tag{Change}
•			□Add
			□Remove
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If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	N/A
	•
If an el Note:	tive date, if other than the date of filing:  [fective 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 605,0207.  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.
e reco rd is f	rd 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 iled.
Dated	16TH DAY OF JUNE 2022
	() the Nile
	Signature of a member or authorized representative of a member
	MARISSA NUNEZ-VILCHES  Typed or printed name of signee