Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number :

: (850)617-6383

From:

Account Name : ALAN J. MARCUS, ATTORNEY AT LAW

Account Number : I20190000099 Phone : (305)937-1800 Fax Number : (305)937-1857

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: dvalero@gfinvestments.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DIXIE POINTE SHOPPING CENTER, LLC

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Registration Section

COVER LETTER

Division of Cor	porations		
DIXIE POR	NTE SHOPPING CENTER. LI	LC	
SUBJECT:	Name of Limi	ted Liability Company	.
The contract substance	Annual and for solver with	missad for filing	
	Amendment and fee(s) are sub-		
Please return all correspo	ndence concerning this matter	to the following:	
	ALAN J. MARCUS		
		Name of Person	·
	ALAN J. MARCUS, ATTO	ORNEY AT LAW	
		Firm/Company	
	20803 BISCAYNE BOUL	EVARD, SUITE 301	
	<u> </u>	Address	
	AVENTURA, FL 33180		
		City/State and Zip Code	
	dvalero@gfinvestments.com		
	E-mail address: (to be used for future annual report not	ification)
For further information of	concerning this matter, please ca	all:	
ALAN J. MARCUS		305 937-1800	
Name o	of Person	at ()	ne Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addres</u> Registration		<u>Street Address:</u> Registration So	ection

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

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

From: Crystal Taylor

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limite	d Liability Compa A Florida Limited	iny as it now appears on our re- Liability Company)	cords.)	-	
The Articles of Organization for this Limited Lia Florida document number L21000526280	ability Company	were filed on 12/15/2021		and as	signed
This amendment is submitted to amend the follo	wing:				
A. If amending name, enter the new name of	the limited liab	oility company here:			
The new name must be distinguishable and contain the we	ords "Limited Liabi	lity Company," the designation "	LLC" or the abb	reviation "I	1C."
Enter new principal offices address, if applica	ible:	4125 NW \$8 AVENUE			
(Principal office address MUST BE A STREE	T ADDRESS)	SUNRISE, FL 33351			
Enter new mailing address, if applicable:		4125 NW 88 AVENUE			
(Mailing address MAY BE A POST OFFICE)	<u>80X)</u>	SUNRISE, FL 33351		··	
B. If amending the registered agent and/or re agent and/or the new registered office addres	<u>s here</u> :		nter the nam	LACI SEI	w regist
Name of New Registered Agent:	ALAN J. MAF	RCUS		121 T	
New Registered Office Address:	20803 BISCAY	YNE BOULEVARD, SUITE		M-7	
	AVENTURA	Enter Floridu street au	<i>ldress</i> , Florida ³³	-F.3-1 	AM :::
		City		- 70 - 3	

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

From: Crystal Taylor

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	VALERO, DORON	4125 NW 88 AVENUE	= Add
		SUNRISE, FL 33351	□Remove
			Change
MGR	REISMAN, STEPHEN H.	8320 SW 92ND TERRACE	□Add
		MIAMI, Fl. 33156	■Remove
			Remove
			□ Change
			∏Add
			Remove
			□ Change
			□Remove
			Change
			□Add
			□ Remove
			□Change

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an effect lote: If	e date, if other than the date tive date is listed, the date must be sp the date inserted in this block d nt's effective date on the Departs	pecific and cannot be prior to date of filing or more than 90 days after toos not meet the applicable statutory filing requirements, this	filing.) Pursuant to 605,02
record : Lis filed		e, but not an effective time, at 12:01 a.m. on the earlier of: (b)	The With day after th
ated	DECEMBER 22	, 2021	DEC 27
		Q Q Q Q Q Q	L. L.
	Signa	ature of a member or authorized representative of a member	AMIII: 07 F STATE FLORIDA
	·		.0:
		DORON VALERO	~

Filing Fee: \$25.00