## Florida Department

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(((H22000275947 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

Prom:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107

Fax Number : (561)214-8442

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

<b>Email</b>	Address:			
CANCIT	voorabb:			

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JMC MELBOURNE, LLC

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## COVER LETTER

P.O. Box 6327 Tallahassee, FL 32314

TO:	Registration S Division of Co		•		
SUBJE	CT:	JMC	Melbourne, LLC		
		Name of Lin	nited Liability Company	<u> </u>	<del></del> .
The end	closed Articles of	Amendment and fee(s) are sui	omitted for filing.		
Please r	return all correspo	ondence concerning this matter	to the following:		
			Miguel A. Maspons, Esq.		
			Name of Person		
			Maspons Advisory Services	5	
		-	Firm/Company		
		232	Andalusia Avenue, Suite	200	
			Address		
		C	oral Gables, Florida 33134	1	
			City/State and Zip Code		
		E-mail address: (	mas@mascorpserv.com to be used for future annual re	eport notification)	<u>.</u>
For furti	ner information c	oncerning this matter, please c		, , , ,	
	Vancssa M	1. Collazo	786	539-1430	
	Name o	f Person	at () Area Code	Daytime Telephon	e Number
Enclose	d is a check for th	ne following amount;			
■ \$25	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclo	esed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres Registration S		Street Add		
	Division of C	orporations	Division	ion Section of Corporation	
	P.O. Box 632	7		tre of Tallahass	

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	BOURNE, LLC		
(Name of the Limited Liability Comp. (A Florida Limited	Liability Company)	on our records.)	<u> </u>
The Articles of Organization for this Limited Liability Company Florida document number  L21000529231	were filed on	12/16/2021	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here	<b>:</b> :	
Dominis Holdings I, LLC	2		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the desi	gnation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1225 Opispo Aver	ıuc	
(Principal office address MUST BE A STREET ADDRESS)	Coral Gables, Flor	ida 33134	
	DO DOM (4402)	·	·
Enter new mailing address, if applicable:	P.O. BOX 144233		
Mailing address MAY BE A POST OFFICE BOX)	CORAL GABLES	, FL 33114	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:  Name of New Registered Agent:	address on our reco	ords, <u>enter the na</u>	me of the new register 2022 AUG
New Registered Office Address:			15 15 559
now Ackhiered Office Address:	Enter Florida	street address	PA PA
	City	, Florida _	Ω To Code
	City		Zip Cod

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 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	James M. McCarthy	135 Charles Street, TH-C	□Add
		New York, NY 10014	≣Remove
			□Change
MGR	Victoria Dobal Arinaga	P.O. BOX 144233	₩Add
		CORAL GABLES, FL 33114	□Remove
			Change
<del></del>			□Add
			□Remove
<u></u>			□Add
			□ Remove
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			□Remove
			Change
	History .		□Add
			□Remove

N/A	g any other informatio			. •	• •
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ect <b>ive dat</b> effective da <u>te:</u> If the d	e, if other than the date the is listed, the date thus block of factive date on the Democratic faction and the date of the	e of filing: pecific and cannot be prior loes not meet the applic	to date of filing or mo	one than 90 days after fi	nal) iling.) Pursuant to 605.0 date will not be listed
ument's <del>c</del> fi	fective date on the Depart	ment of State's records.		, requirements, trus	gaze will not be usted
ord specifi filed.	ics a delayed effective date	e, but not an effective ti	m <b>e,</b> at 12:01 s.m. o	n the earlier of: (b)	The 90th day after the
ed	August 11	2022	all t	dren.	
— <del>-</del>		,,			
	Signa	ture of a member or autho	rized representative of	f a member	
	Mi	guel A. Maspons, Attor	ney-In-Fact for enti	ity	
			d name of signee		

. . . .