Florida Department of State

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Division of Corporations

Fax Number : (850)617-6383

From:

ACCOUNT Name : STEARNS WEAVER MILLER WEISSLER ALHADEFF & SITTERSON

Account Number : I20060000135 : (305)789-3200 Phone

: (305)789-4137 Fax Number

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

jerry@imperialsterling.com

CM NO. 05863.0070

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Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H220001981353

	SOUTHEAST, LL				
(Name of the Limited Liability Compa-	ny as it now nones Jability Company)	on our records.)		-	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on	01/13/2022	and	assigned	
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabl	lity company he	<u>re</u> :			
The new name must be distinguishable and contain the words "Limited Liabili	lty Company," the d	esignation "LLC" or the al	bbreviation	"L.L.C."	_
Inter new principal offices address, if applicable: c/o IMPERIAL STERLIN			G, LTD		
Principal office address MUST BE A STREET ADDRESS	287 BOWMAN AVE 2ND FLOOR STE 222				
Tructor office Harrison Front Mar (1 0 x 1 1 2 2 7 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	PURCHASE, NY 10577				
Enter new mailing address, if applicable:		IAL STERLING, LT			
(Mailing address MAY BE A POST OFFICE BOX)	287 BOWMAN AVE 2ND FLOOR STE 222				
	PURCHA	SE, NY 10577			
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our r	ecords, <u>enter the nan</u>	ne of the	new regis	<u>terec</u>
			-	022	
Name of New Registered Agent:			: •	<u>د</u>	_
Name to a single of the state o			•	1 ⊒:	Ή.
New Registered Office Address:	Enter Flor	ida sireei address	• • • • • • • • • • • • • • • • • • • •	 	= 77,∓7
		. Florida		A	50
 	City	, F1011 02	Zip Co	منه	_
New Registered Agent's Signature, if changing Registered Agent:			;	10	
hereby accept the appointment as registered agent and agre					5 . L.

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

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<u>Title</u>	Name	Address	Type of Action
			□Remove
			Change
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			□Remove
			□Change

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<u>ote:</u> If th	re date inserted in this blo	iste of filing: be specific and cannot be prio ck does not meet the appli- partment of State's records	cable statutory filing :	(optional) othen 90 days after filing.) Pun ocquirements, this date will	suant to 605.020 not be listed a
ecord sp is filed.	ecifies a delayed effective	date, but not an effective	time, at 12:01 a.m. on	the earlier of: (b) The 90	th day after the
ted	June 7	2022	<u> </u>		
		Jerrold G			
		signature of a member or auti	norized representative of	a member	

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