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Division of Corporations

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(((H22000255246 3)))



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Fax Number : (850)617-6383

From:

Account Name : HUBCO

Account Number : 104662003400 Phone : (516)935-3940 Fax Number : (516)935-3088

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

Email Address:__

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SIGNATURE PREMIER PROPERTIES LLC

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JUL 28 2022

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H22000255246

SIGNATURE PREMIER PROPERTIES LLC	
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on	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 end with the words "Limited Liability Company," the designation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our records, enter the registered agent and/or the new registered office address here:	name of the new
Name of New Registered Agent:	<u> </u>
New Registered Office Address: Enter Florida street address	PROVE
——————————————————————————————————————	ip (Me
New Registered Agent's Signature, if changing Registered Agent:	2

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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

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MGR =	Manager	
AMBR =	Authorized	Member

Title	<u>Name</u>	Address	Type of Action
MGR	JOHN WOODWARD	4946 RUTLAND GATE	= Add
		SARASOTA, FL 34235	☐ Remove
		<u></u>	
			□ Add
			☐ Remove
			Remove
			□ Remove
			□ Add
			☐ Remove
			Add
			□ Remove

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late this do	te, if other than the date ne must be specific, cannot be p ocument is filed by the Florida D JULY 25	of filing:	(optional) e more than 90 days after
late this do	JULY 25	2022 January	e more than 90 days after
ctive date this do	JULY 25	Department of State)	e more than 90 days after

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