Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000241212 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : I20160000017 Phone : (855)498-5500 Fax Number : (800)432-3622

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

Email	Address:		

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **BOMART REAL ESTATE, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$55.00

Electronic Filing Menu

Corporate Filing Menu

Help

JUL 1 8 2022 K. Brumbley

## **COVER LETTER**

	gistration S vision of Co			
eina in cor.		REAL ESTATE, LLC		
SUBJECT:		Name of Lin	nited Liability Company	
The enclose	d Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please returi	all correspo	ondence concerning this matter	to the following:	
		JAY KOENIGSBERG, E	SQUIRE	
		·	Name of Person	· <u></u>
		CARLTON FIELDS, P.A		
			Firm/Company	
		700 SW IST AVENUE, 9	UITE 1200	
			Address	
		MIAMI, FLORIDA 33136	SQ.	
			City/State and Zip Code	
		JKOENIGSBERG@CARL		
		E-mail address:	to be used for future annual report n	eotification)
For further in	nformation c	concerning this matter, please o	all:	
JAY KOEN	GISBERG		305 539-7333	
	Name o	f Person		time Telephone Number
Enclosed is a	check for th	he following amount:		
■ \$25.00 F	iling Fee	S30.00 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)
	iling Addres		<u>Street Address:</u> Registration S	
		orporations	Division of C	
P.C	Box 632	7 -	The Centre of	
Tal	lahassee, F	FL 32314	2415 N. Mon	roe Street, Suite 810

Tallahassee, FL 32303

company has been notified in writing of this change.

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H22000241212

(Name of the Limited Liability Comp. (A. Florida Limited	any as it now appears on our reco Liability Company)	Mr)
The Articles of Organization for this Limited Liability Company	were filed on MARCH 25, 20	22 and assigned
Florida document number L22000123613		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oliity company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LI	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2800 Ponce de Leon Blvd,	<b>5</b> 2
(Principal office address MUST BE A STREET ADDRESS)	Suite 1160	022
	Coral Gables, Fl 33134	l U
		.; -
Enter new mailing address, if applicable:	2800 Ponce de Leon Blvd,	5
(Mailing address MAY BE A POST OFFICE BOX)	SUITE 1160	PH C
	Coral Gables, Florida 33134	ယ္
		57
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:	address on our records, <u>ents</u>	er the name of the new register
New Registered Office Address:		
	Enter Florida street addr	dif
	, I	Florida
New Registered Agent's Signature, if changing Registered Agent	•	Esp Cour
HEW REGISTER ABOUT 1 STRUKTUTE, IT CHANGING REQUIEFED AREIN	<u> </u>	

H22000241212

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 H22000241212

Title	Name	Address	Type of Action
MGR	VICTOR BROWN	2800 Ponce de Leon Blvd,	\alpha \alpha \dd
		Suite 1160	□Remove
		Coral Gables, Fl 33134	□Change
MGR	MICHAEL WOHL	2800 Ponce de Leon Blvd,	
		Suite 1160	Remove
		Coral Gables, Fl 33134	Change
			□Add
			□ Remove
			Change
	<del></del>		
			Remove
			Change
			□ Remove
	•		© Change
			DAdd
			□Remove
			□ Change

H22000241212

<del></del>					
·		<del>.</del>			<del></del>
		·			
<del></del>			<del></del>		<u>-</u>
			-		
	<del></del>				
				·	
			<del></del>		<del></del>
		<del></del>			<del></del>
•			· · · · · · · · · · · · · · · · · · ·		
Ne: It the date	other than the date of fill listed, the date must be specific a neserted in this block does no we date on the Department of	it meet tite applicable	ate of filing or more than statutory filing requi	(optional) 90 days after filing.) Pursuan ements, this date will not	t to 605.020 be listed s
ecord specifies is filed.	delayed effective date, but r	not an effective time,	at 12:01 a.m. on the c	arlier of: (b) The 90th d	ay after the
FT 10 3 5 4 5	· · · · · · · · · · · · · · · · · · ·	2022	ı		
ted			~		
ated	4	who later	i		
ated	Signature of	a member of authorize	A representative of a me	mbcr	

Filing Fee: \$25.00 H22000241212