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## Florida/Depalitment a on of Corporation ectronic Filing Cover Sheet

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(((H23000390947 3)))



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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GLADLUCK CENTER LLC

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S. ROBERTS

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N0.617 #002 H23000390947 3 Page 2 of 4

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GLADLUCK CEI	NIER LLC		
Name of the Limited Liability Company (A Florida Limited Lia	as it now appears of bility Company)	on our records.)	<del></del>
The Articles of Organization for this Limited Liability Company w  Florida document number		03/11/2022	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability	ty company here	; <b>:</b>	
ATLANTIC GULF & PACIFIC LLC			
The new name must be distinguishable and contain the words "Limited Liability	Company," the desi	gnation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			25.5
	<u>-</u>		
	-		
Enter new mailing address, if applicable:			
(Moiling address MAY BE A POST OFFICE BOX)	· · · · ·		:
		•	.;
-			
B. If amending the registered agent and/or registered office adeagent and/or the new registered office address here:	iress on our reco	ords, enter the nam	e of the new registere
Topic state and the state and			
Name of New Registered Agent:			
	<del></del>		
New Registered Office Address:	Enter Florida	street address	· · · · · · · · · · · · · · · · · · ·
<del></del>	Clty	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	·		•
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete pe accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office ad company has been notified in writing of this change.	rformance of my vided for in Cha	v duties, and I am fe apter 605, F.S. Or,	amiliar with and if this document is

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If Changing Registered Agent, Signature of New Registered Agent

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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>Titlo</u>	<u>Name</u>	Address	Type of Action
	<del></del>		DAdd
			□ Remove
		<del></del>	□Add
		<del> </del>	□Remove
			□Change
			□Add
			☐ Change
			CRemove
			Change
			□Add
		<del></del>	□Remove
			□ Change
<del></del>	<del>.</del>		□Add
			□Remove

D. If amending a	ny other information, enter change(s) here: (Attach additional sheets, if necessary.)
مانية مانية والمانية	
*****	
9.07-70-40-0 <sup>-70</sup> -6-4-4-1	
<u> </u>	
Note: If the dar	if other than the date of filing:  (optional) is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(1) inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ctive date on the Department of State's records.
f the record specific ecord is filed.	s a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated Nov	10, 2023
	Esmajil Ghasemisahebi Featelt Gasemisahebi (Nov. 16, 2073 15:04 EST)
	Signature of a member or authorized representative of a member
	ESMATIL GHASEMISAHEBI
<del></del>	Typed or printed name of signee

Filing Fee: \$25.00