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Division of Corporations

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From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 : (561)214-8442 Fax Number

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 8PM PROPERTY, LLC

Certificate of Status	0
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Estimated Charge	\$25.00

59 ä 14154847068

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

8PM PROPERTY, LLC (Name of the Limited Liability Company (A Florida Limited Lia	as it now appears	on our records.)	
A Florida Limited Lia The Articles of Organization for this Limited Liability Company w Florida document number	0	4/07/2022	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabili	ty company her	<u>e:</u>	
The new name must be distinguishable and contain the words "Limited Liability	Company," the des	ignation "LLC" or the ab	breviation "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 adagent and/or the new registered office address here:	dress on our rec	cords, <u>enter the nam</u>	e of the new regis
Name of New Registered Agent:	 		22,
New Registered Office Address:	Enter Floria	da street address	AFR 28
	City	, Florida	Zip Code
No. 13 - 14 and 4 mant's Signature of shounding Degistered Agents	<i>0.1,</i>		— œ
New Registered Agent's Signature, if changing Registered Agent;		and the I Guetlan as	_

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	Carlos Daniel Mora	9420 SW 66 STREET	X lAdd
		MIAMI, FL 33173	[]Remove
			□Change
MGR	Jaquelyn Mora	9420 SW 66 STREET	<u> </u>
	MIAMI, FL 33173	Remove	
			Change
			□Add
		□Remove	
			Change
			□ Add
			[]Change
		_	
	·	□Remove	
			□Change
			□Add
			□Remove
			Change

	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
_		
		
<u></u>		
Note: If	e date, if other than the date of filing:	0207 d as
e record : rd is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after d.	the
Dated _	April 28	
	/s/ Caitlin Lazarus Signature of a member or authorized representative of a member	
	Caitlin Lazarus, Attorney-in-Fact Typed or printed name of signee	

Filing Fee: \$25.00