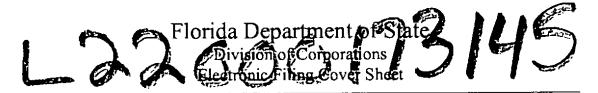
Date: 05/25/22 Time: 7:21 PM Page: 01/04 To: 18506176383 From: 14693173436



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.

(((H22000185530 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 : LEGALINC CORPORATE SERVICES INC.

Account Number : I20180000011 Phone : (844)386-0178 Fax Number : (214)317-4754

**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

TIL 3601 INTEGRA LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

To: 18506176383 From: 14693173436 Date: 05/25/22 Time: 7:21 PM Page: 02/04

(((H220001855303)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TIL 3601 INTEGRA 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 04/26/2022 _____ and assigned Florida document number 1.22000173145 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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" 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 name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

New Registered Agent's Signature, if changing Registered Agent:

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

To: 18506176383 From: 14693173436 Date: 05/25/22 Time: 7:21 PM Page: 03/04

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR = Manager

AMBR + Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	INTEGRA SOLUTIONS LLC	150 SE 2ND AVE STE 800	🗆 Add
		MIAMI, FL 33131	Remove
			Change
MGR	TIL 3601 Manager LLC	150 SE 2ND AVE STE 800	€ Add
		MIAMI, FL 33131	□Remove
			Change
			□Add
			□Remove
			Change
			□ Add
			□Remove
			
			🗀 Add
			□Remove
			[]-Change
			🗀 Add
((H)	22000185530 3})}		□Remove
			☐ Change

		(((H22000185530 3)))	
. If amending any other infort	nation, enter change(s) here: (A	ttach additional sheets, if necessary.)	
		, ,	
	<u> </u>		
			
			<u>.</u>
			
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	- <u> </u>		
	100000000		
			
Effective date, if other than t	the date of filing:	(optional)	
(If an effective date is listed, the date	must be specific and cannot be prior to day s block does not meet the applicable	(optional) te of filing or more than 90 days after filing.) Pursua statutory filing requirements, this date will no	nt to 603 0207 (3)(b) t be listed as the
the record specifies a delayed effectord is filed.	ctive date, but not an effective time, a	at 12.01 a m. on the earlier of: (b) The 90th o	day after the
Dated May 11	2022		
	P., 01	7	
 	Signature of a member or authorized	in presentative of a member	<u> </u>
		,	
	Craig P. Thompson, as auth Typed or printed na	norized representative	
		-	

. To: 18506176383 From: 14693173436 Date: 05/25/22 Time: 7:21 PM Page: 04/04

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