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2022-10-20 20:43:34 GMT

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From: Yanet Avila

10/19/22, 10:58 AM

Division of Corporations



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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SAINT MARK UNIVERSITY LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SAINT MARK UNIVERSITY LLC	
(Name of the Limited Linhility Company a (A Floridu Limited Liabi	s it gow appears on our records.) lity Company)
The Articles of Organization for this Limited Liability Company wer Florida document number <u>1.22000182853</u> .	re 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 contain the words "Limited Liability C	Company," the designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable:	20 20 20 20 20 20 20 20 20 20 20 20 20 2
Enter new mailing address, if applicable: <u>(Mailing address MAY BE A POST OFFICE BOX)</u>	AVASSEE INT
B. If amending the registered agent and/or registered office add agent and/or the new registered office address here:	ress on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	Enter Florida street address

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

I hereby accept the appointment as registered agent and agree to uct 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.

City

If Changing Registered Agent, Signature of New Registered Agent

, Florida _

Zip Code

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

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
AMBR	Gerardo Alvarado Zepeda	2000 PONCE DE LEON BLVD. STE 600	🗆 Add
		CORAL GABLES, FL 33134	固Remove
			🗆 Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

(If an c Note	tive date, if other than the date of filing:	.0207 (3)(b) ed as the
If the reco record is (ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day afte filed.	the
Dated	d,,,	
	Angel Martinez	
	Signature of a member or authorized representative of a member	
	ANGEL R. MARTINEZ	

Typed or printed name of signee

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