h22000191761

| (Req | uestor's Name) | |
|---------------------------|------------------|-------------|
| (Add | ress) | |
| (Add | ress) | |
| (City/ | /State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Busi | iness Entity Nan | ne) |
| (Doc | ument Number) | - |
| Certified Copies | Certificates | s of Status |
| Special Instructions to F | iling Officer: | |
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Office Use Only



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2022 JUN -1 PM 2: 41

COVER LETTER

| TO: Registration Solivision of Co | | | | | |
|--|---|---|--|--|--|
| /3.5.1.6c = = 4.4.4.c. | ILORS, LLC. | | | | |
| SUBJECT: Name of Limited Liability Company | | | | | |
| The enclosed Articles of | Amendment and fee(s) are sub | omitted for tiling. | | | |
| Please return all correspondent | ondence concerning this matter | to the following: | | | |
| | SANTIAGO J. PIAZZA | | | | |
| | | Name of Person | . | | |
| | MARGARITO, LLC | | | | |
| Firm/Company | | | | | |
| 6303 BLUE LAGOON DRIVE, SUITE 200 | | | | | |
| | <u> </u> | Address | | | |
| | MIAMI, FL 33126 | | | | |
| | | City/State and Zip Code | | | |
| | ebaltar@glscepa.com | | | | |
| For further information of | n-mail address: (concerning this matter, please c | to be used for future annual report not all: | Hication) | | |
| SANTIAGO J. PIAZZA | | 305 373-0123 | | | |
| Name o | of Person | at () Area Code Daytin | ne Telephone Number | | |
| Enclosed is a check for the | he following amount: | | | | |
| ■ \$25.00 Filing Fee | ☐ \$30.00 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) | | |
| Mailing Address Registration | | Street Address: Registration Se | ction | | |
| Division of Corporations | | | Division of Corporations | | |
| P.O. Box 6327 | | | The Centre of Tallahassee | | |
| Tallahassee, FL 32314 | | 2415 N. Monroe Street, Suite 810 | | | |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2022 JUN-1 PM 2: 48 SECRETARY OF STATE TALLAHASSEE, FL

FOUR SAILORS, 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 Florida document number 1.22000191761 | were filed on <u>04/21/2022</u> | and assigned | |
|--|---|--|--|
| This amendment is submitted to amend the following: | | | |
| A. If amending name, enter the new name of the limited liabi | lity company here: | | |
| The new name must be distinguishable and contain the words "I imited Liability | ty Company," the designation "ELC" | " or the abbreviation "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 a agent and/or the new registered office address here: Name of New Registered Agent: | ddress on our records, <u>enter (</u> | | |
| | | | |
| New Registered Office Address: | Enter Florida street address | | |
| | , Florida | | |
| Marine (c. | Cuy | Lip Code | |
| New Registered Agent's Signature, if changing Registered Agent: | | | |
| I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change. | performance of my duties, an rovided for in Chapter 605, I | d I am familiar with and F.S. Or, if this document is | |
| 1F C'han | ging Registered Agent, Signature of | I 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

| Title | Name | Address | Type of Action |
|------------------------|--------------------|---------------------------------------|----------------|
| MGR | MARGARITO, LLC. | 6303 BLUE LAGOON DRIVE, SUITE 200 | |
| | | MIAME, FL 33126 | ≣Remove |
| | | | |
| MGR SANTIAGO J. PIAZZA | SANTIAGO J. PIAZZA | 6303 BLUE LAGOON DRIVE, SUITE 200 | 篇Add |
| | | MIAMI, FI. 33126 | □Remove |
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