Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

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

\*\*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 SHILL LINCOLN LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SHILL LINCOLN LLC				
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company  Florida document number L22000195806	were fited on 05/12/2022 and assigned			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	250 West Street			
(Principal office address MUST BE A STREET ADDRESS)	Unit 4C			
THE THE STATE STATE STATE OF THE STATE OF TH	New York, NY 10013			
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	One Datran Center			
	9100 South Dadeland Blvd., Suite 901			
	Miami, FL 33156			
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	Enter Florida street address  Florida			
	City Zip Code			
New Registered Agent's Signature, if changing Registered Agent	7			

14154847068

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
			□Add
			Remove
			Change
			□Add
			Remove
			□Add
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fective date, if other than the an effective date is listed, the date must ote: If the date inserted in this blo	date of filing:t be specific and cannot be pri	or to date of filing or	more than 90 days after	nal) filing.) Pursuant to 605.020 date will not be listed i
cument's effective date on the De	epartment of State's record	ls.	ng requirement our	
ecord specifies a delayed effective is filed.	e date, but not an effective	time, at 12:01 a.m	on the earlier of: (b)	The 90th day after th
	2//22		1	
May 19	. 2022	·		
	Signature of a member or au		ve of a member	