## L Z Z O O O Z O 4 6 O 7

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entity Name)
(Document Number)
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<i>, #</i> . ♦

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06/13/23--01014--018 \*\*225.00

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Manhattan Property Holdings, LLC

company has been notified in writing of this change.

2023 JUN 13 AM 7: 23

oility Company were filed on April 2	our records.)  The little state of the state
oility Company were filed on April 2	
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ing:	
ne limited liability company here:	
Is "Limited Liability Company," the design	ation "LI.C" or the abbreviation "L.L.C."
le:	
ADDRESS)	
<u></u>	
<u></u>	ds, enter the name of the new regis
ALPER TRUSTEES, LLC	
255 Primera Blvd., Suite 160	
Enter Florida si	reet address
Lake Mary	, Florida 32746 Zip Code
Ciņ	Zip Code
eistered Agent:	
	is "Limited Liability Company," the designale:  ADDRESS)  istered office address on our recornere:  ALPER TRUSTEES, LLC  255 Primera Blvd., Suite 160  Enter Florida st Lake Mary  City

being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability

If Changing Registered Agent, Signature of 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

<u>Title</u>	Name	Address	Type of Action
MGR	David Gorgen	PO Box 10035	DAdd
		Tampa, FL 33679	■Remove
			□ Change
MGR	Scotsman Property Holdings, LLC	6 S. State Street	<b>=</b> Add
		Dover, DE 19901	\ Remove
			Change
		□Add	
			□Remove
			☐ Change
			□Add
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			□Add
		<del></del>	□Remove
			□Change

_	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effe Note:	ve date, if other than the date of filing:
If the record	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
Dated_	06 / 08 / 2023
	Doub Donger
	Signature of a member or authorized representative of a member
	David Gorden  Typed or printed name of signee

Filing Fee: \$25.00 Doc ID: 1e5f50c7c1f448f1335957746304259e65b5987e