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DATE:

2/7/25

NAME: LBOA HUTCHINSON ISLAND LLC

TYPE OF FILING: AMENDMENT

COST:

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ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

	Registration Se Division of Cor						
SUBJEC	LBOA Huto	chinson Island LLC					
30000	· · ·	Name of Lim	ited Liability Company				
The encl	osed Articles of	Amendment and fee(s) are sub-	mitted for filing.				
Please re	tum all correspo	ndence concerning this matter	to the following:				
		Ronald Lewis					
			Name of Person				
		Ronald Lewis PA					
	Firm/Company						
	2424 N. Federal Highway, Suite 411						
			Address				
		BOca Raton, Florida 3343	l .				
		Ron@Ronlewispa.com	City/State and Zip Code	 			
		E-mail address: (to be used for future annual report notifi	ication)			
For furth	er information c	oncerning this matter, please co	all:				
Ronald I	Lewis, Esq		561 485-1599				
Name of Person		f Person	Area Code Daytime	Daytime Telephone Number			
Enclosed	l is a check for th	ne following amount:					
□ \$25.	00 Filing Fee	S30.00 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 Addres	<u>s:</u> Section	Street Address:	tion			

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2025 JAN 30 AM 11: 11 LBOA Hutchinson Island 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 August 29, 2022 and assigned Florida document number L22000378269 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 "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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Ronald Lewis Name of New Registered Agent: 2424 N. Federal Highway, Suite 411 New Registered Office Address: Enter Florida street address **Boca Raton** Florida 33431

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.

City

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>	<u>Name</u>	Address	Type of Action
MGR	Avraham A Atzmon Sr	1536 SW 5th Ave	
		Boca Raton, Florida 33432	≅Remove
			Change
MGR	Avraham Atzmon	2424 N. Federal Highway	\(\exists \) Add
		Suite 411, Boca Raton, Florida 33431	□Remove
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