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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GASSMAN, CROTTY & DENICOLO, P.A.

Account Number : 075350000514 Phone : (727)442-1200 Fax Number : (727)443-5829

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

		_		
Fma	ń	1	Address.	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 2919 WEST CHERRY STREET, L.L.C.

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Certificate of Status	0
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Page Count	03
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

2919 WEST CHERRY STREET, L.L.C			
(Name of the Limited L. (A.F.	lability Company as it now appears on our reco lerida Limited Liability Company)	ords.)	
The Articles of Organization for this Limited Liabil	ity Company were filed on		and assigned
Florida document number L22000393883			
This amendment is submitted to amend the following	ığ:		
A. If amending name, enter the new name of the	limited liability company here:		
806 SOUTH OCEAN BLVD, L.L.C.			
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "L	LC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable	:		
(Principal office address MUST BE A STREET A	DDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX			
		·C:	202
B. If amending the registered agent and/or regist	tered office address on our records, <u>ent</u>	er the name	of the new registered
agent and/or the new registered office address he	ere:		. U
			-
Name of New Registered Agent:			
		, -	<u> </u>
New Registered Office Address:	Enter Florida street addi		<u> </u>
		₹.	9
_		Florida	7 6 1
	City		Zıp Code

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.

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

MGR =	Manager	
AMBR =	Authorized	Mem bei

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Change
			□Add
		·	□Remove
			☐Change
			□Add
			□Remove
			□Add
			□Remove
			□Change
			
			□Remove
			□Change
			□Add
			Remove
Audit Fax	# H23000077908 3		☐ Change

iffec	ive date, if other than the date of filing:
færef Note:	fective date is listed, the date must be specific and cumm be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as nearly effective date on the Department of State's records.
: reco: પ્રીકર્ષિ	rd specifies a delayed effective date, but not an effective time, in 12:91 a.m. on the earlier of (5). The 90th day after the led.
N. 1	February 28 2023
жей	February 28 2023
	Signature of a member or authorized representative of a member
	ALAN S. GASSMAN, ESQ., Auth. Rep.