

4/26/23, 2:57 PM

Division of Corporations

Florida Department of State
Division of Corporations
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(((H230001561173)))



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To:

Division of Corporations
Fax Number : (850)617-6383

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Account Name : WEISS SEROTA HEIFMAN COIF & BIERMAN P
Account Number : I20220000155
Phone : (305)854-0800
Fax Number : (305)854-0800

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Email Address: fruiz@wsh-law.com

LLC AMND/RESTATE/CORRECT OR M/MIG RESIGN
BRISKEL POINTE AT BOCA HARBOUR LLC

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COVER LETTER

TO: Registration Section
Division of Corporations

((H23000156117 3)))

SUBJECT: BRISKEL POINTE AT BOCA HARBOUR LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Fabio Gallanza

Name of Person

Weiss Serota Hellman Cole & Bierman

Firm/Company

2800 Ponce de Leon Blvd, Suite 1200

Address

Coral Gables, FL 33134

City, State and Zip Code

fruiiz@wsh-law.com

E-mail address. (to be used for future annual report notification)

For further information concerning this matter, please call:

Fernanda Ruiz

305 854-0800

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

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

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

((H23000156117 3)))

BRISKEL POINTE AT BOCA HARBOUR 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 12-09-2022 and assigned
Florida document number L22000517991.

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:

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:

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.

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If appointing Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

(((H23000156117 3)

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	SCOTT BRENNER	102 NE END STREET	☐ Add
		UNIT 288	☒ Remove
		BOCA RATON, FL 33432	☐ Change
MGR	SFB EVOLUTION, INC	102 NE END STREET	☒ Add
		UNIT 288	☐ Remove
		BOCA RATON, FL 33432	☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove

