Division of Corporations



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Division of Corporations

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From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ANAIRA REALTY LLC

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MAS 0 6 5053

K. Brumbisy

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ANAIRA REALTY LLC						
(Name of the Limited L (A F	iability Compan Iorida Limited L	ny as it now appears on our ability Company)	records.)			
The Articles of Organization for this Limited Liabil	ity Company v	were filed on 02/02/202	3	ar	nd assign	ned
Florida document number L230(00)51448	 ·					
This amendment is submitted to amend the following	ng:					
A. If amending name, enter the new name of the	limited liabil	ity company here:				
The new name must be distinguishable and contain the words	"Limited Liabili	ty Company," the designatio	n "LLC" or the i	ibbreviati	on "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	Q					
						
B. If amending the registered agent and/or regist	tered affice so	idress on our records	enter the nur	no of th	o now P	wiistoro
agent and/or the new registered office address he		idies, on our records,	circi (iic iiai	ne or th	C II CYY I	<u>egisteret</u>
Name of New Registered Agent:			-		2023	
New Registered Office Address:				• • ;	Ä	2
		Emer Florida street	address		1	
_			Florida	<u>:</u>		
N. D. L. L. L. B. L. L. L. B. L. L. B.		Сиу		Zip ('ottes CD	£.
New Registered Agent's Signature, if changing Register.				-	5: 5(
I hereby accept the appointment as registered ag- provisions of all statutes relative to the proper an accept the obligations of my position as registere being filed to merely reflect a change in the regis company has been notified in writing of this chan	nd complete p ed agent as pr tered office a	erformance of my duti ovided for in Chapter	es, and Lam 605, F.S. Or	familia , if this	r with a docume	nd

If Changing Registered Agent, Signature of New Registered Agent

□ 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:

→ 18506176383

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Johanna Bolick		
			□Change
			□Add
			☐ Remove
			☐Change
			□Add
			□ Remove
			□Change
			🗀 Add
		 	□ Remove
			□Change
			□Add
			□Remove
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			□Add
			□Remove

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Effortive	the date inserted in this block of	specific and cannot be prior does not meet the applications.	to date of filing or more than 90 dable statutory filing requirenx	_ (optional) ays after filing.) Pursuant to 605,0207 ents, this date will not be listed as
(If an effecti Note: If t	's effective date on the Depart	ment of State s records.		
(If an effecti Note: If the document of the record specific to the contract of the contract o	pecifics a delayed effective dat			er of: (b) The 90th day after the
(If an effecti Note: If t document he record spord is filed.	pecifics a delayed effective dat	e, but not an effective ti		er of: (b) The 90th day after the
(If an effecti Note: If the document of the record spectral is filed.	pecifies a delayed effective dat arch 2	e, but not an effective ti	me, at 12:01 a.m. on the earli	
(If an effecti Note: If the document of the record spectral is filed.	pecifies a delayed effective dat arch 2	e, but not an effective ti		

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