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From:

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Account Number : 120140000060

Phone : (305)406-3800

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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 101 ROYAL MIAMI LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

101 ROYAL MIAMI LLC	
(Name of the Limited Liability Company as it not (A Florida Limited Liability Co	w appears on our records.) mpany)
The Articles of Organization for this Limited Liability Company were filed	d on and assigned
Florida document number L23000122954	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability comp	pany here:
The new name must be distinguishable and contain the words "Limited Liability Compar	ny," 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:	202.
(Mailing address MAY BE A POST OFFICE BOX)	<del>्रा</del>
	2
<del></del>	¥ 1
B. If amending the registered agent and/or registered office address o	on our records, enter the name of the new register
agent and/or the new registered office address here:	? <del>.</del>
	27
Name of New Registered Agent:	· .
New Registered Office Address:	
A A A A A A A A A A A A A A A A A A A	Enter Florida street address
	Florida
City	, Florida Zio 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, 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	SILVIO DE JESUS CAETANO	3180 NW 36 STREET SUITE 406	□ Add
		DORAL FL 33166	□Remove
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	,		□Remove
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(If an effect Note: If	e date, if other than the dat tive date is listed, the date must be so the date inserted in this block of it's effective date on the Depart	pecific and cannot be prior to does not meet the applicab	date of filing or more than old statutory filing requ	(optional) n 90 days after filing.) Pursificements, this date will r	uant to 605,0207 and be listed as
ne record s ord is filed	specifies a delayed effective dat d.	e, but not an effective tim	ie, at 12:01 a.m. on the	carlier of: (b) The 90tl	h day after the
Dated	MARCH 24	2023	_•		
		There	_		
	Sign	ature of a member or author	ized representative of a m	rember	
	SILVIO DE JESUS CAETA	ano			
		Typed or printed	name of signee		

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