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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ZIMMERMAN, KISER, & SUTCLIFFE, P.A.

Account Number : I19990000006

Phone : (407)425-7010

Fax Number : (407)425-2747

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

Email Address:\_corporate@zkslawfirm.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **MURFREESBORO 252 MGR, LLC**

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Murfreesboro 252 MGR, 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 March 28, 2023 and assigned

Florida document number L23000141487

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 "LLC."

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:

## New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent:

New Registered Office Address:

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

Enter Florida street address

\_, Florida\_

DocuSign Envelope iD: 633E0ÅE7-B96A-4EC6-9F2B-1B8BA40353AA
11 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	Stone Street Multifamily Group, Inc.	2687 Riverside Avenue	
		Merrick, New York 11566	Remove
			Change
MGR	Stone Street East Main Manager, LLC	2250 Arthur Street	
		Merrick, New York 11566	□Remove
			□ Change
		<del></del>	🗆 Add
			□Remove
			☐ Change
		<del></del>	
			□Remove
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fective date, if other than the date of filing:	) 605 0207 : listed as
ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day a is filed.	after the
ted July 12 , 2023 ,	
OocuSigned by:	
Signature of a member or authorized representative of a member	_
Charles Taylor	

Filing Fee: \$25.00