L33000147888

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Y. SCOTT

COVER LETTER

♣ TO:

Registration Section

Tallahassee, FL 32314

Division of Cor	porations		
	IZCAYA LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	amitted for filing	
		-	
ricase return air correspo	ondence concerning this matter	to the following.	
	Gary C. Granoff, Esquire		
		Name of Person	
		Firm/Company	202
	2000 South Ocean Blvd.,		2023 HAY 10 PH 2: 1
	 	Address	5
	Palm Beach, FL 33480		PH 2
		City/State and Zip Code	
	ggranoff@garygranoftlaw.c		
		to be used for future annual report noti	lication)
For further information c	oncerning this matter, please c	all:	
Gary C. Granoff		516 353-0276 at ()	
Name o	f Person		e Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address		Street Address:	
Registration S Division of C		Registration Se Division of Cor	
P.O. Box 632		The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1	2.5	1.7		1. 21		~ .		. 1		-
	25	v	А	- V .	17		·Y.	A	 . (

(Name of the Limite	d Liability Compa A Florida Limited	any as it now appears on c Liability Company)	our records.)		
The Articles of Organization for this Limited Lia Florida document number L23000147828	ability Company	were filed on $\frac{3/23/202}{}$	and assigned		
This amendment is submitted to amend the follo	wing:				
A. If amending name, enter the new name of	the limited liab	oility company here:			
The new name must be distinguishable and contain the we	ords "Limited Liabi	lity Company," the designa	nion "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applica	ble:	2000 SOUTH OCEAN BLVD., APT. 303N			
(Principal office address MUST BE A STREET	(ADDRESS)	PALM BEACH, FL 33480			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E	<u>80X)</u>	PALM BEACH, FL 3	N BLVD., APT. 303N 33480		
B. If amending the registered agent and/or re agent and/or the new registered office address		address on our record	ds, enter the name of the new regis		
Name of New Registered Agent:	Gary C. Grano	ff, Esquire	0		
New Registered Office Address:	2000 South Oc	ean Blvd., Apt. 303N Enter Florida su	reet address		
	Palm Beach		, Florida ³³⁴⁸⁰		
		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.

If Changing Registered Agent, Signature of New Registered Agent

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	Gary C. Granoff	2000 South Ocean Blvd., Apt. 303N	= Add
		Palm Beach, FL 33480	□Remove
			□Change
			□Add
			□Remove
			□ Change
			
			□ Change
		<u> </u>	Add ——
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			10.70 10.40	PH III
			[4]	<u>-</u>
fective date, if other than the neffective date is listed, the date mate: If the date inserted in this becament's effective date on the I	ust be specific and cannot be pri block does not meet the app	licable statutory filin	ore than 90 days after filing.) g requirements, this date v	Pursuant to 605,020 will not be listed as
ecord specifies a delayed effecti is filed.	ve date, but not an effective	time, at 12:01 a.m.	on the earlier of: (b) The	90th day after the
	2023			
ted May 9	$\frac{1}{\sqrt{2}}$	<u></u> .		
nted May 9	Signature of a member or au	thorized representative	of a member	

Filing Fee: \$25.00