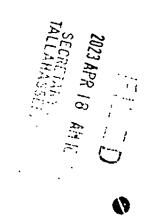


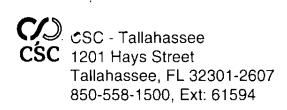
(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:		
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	J. APR	HORNE 18 2023

Office Use Only









To: Department Of State, Division Of Corporations

From: Eyliena Baker

Ext: 61594 Date: 04/18/23 Order #: 1206505-1

Re: 4150 NE 27 AVE, LLC Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Amount to be deducted from our State Account: \$25.00 - FL State Account Number:

120000000195

Authorization:

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

DocuSign Envelope ID: 104EE836-B9ED-4F82-B222-A41128C0BB8B

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Or	7.
		202 SE 202
4150 NE 27 AVE, LLC		CRI An
(Name of the Limited Liabil	ity Company as it now appears on our records.) a Limited Liability Company)	65 8 7
(A riona	a Clinited Diability Company)	2 0 P
The Articles of Organization for this Limited Liability C	Company were filed on 04/10/2023	and assigned
Florida document number L23000169698	<u></u> .	- TO
This amendment is submitted to amend the following:		40
A. If amending name, enter the new name of the lim	tited liability company here:	4
The new name must be distinguishable and contain the words "Lin	nited 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 ADD)	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
(Maining dadress MAT BE A FOST OFFICE BOA)	-	
		·
B. If amending the registered agent and/or registere	d office address on our records, enter the	nume of the new registeres
agent and/or the new registered office address here:	d office address on our records, <u>enter the</u>	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	. Florid	la
	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

DocuSign Envelope ID: 104EE836-B9ED-4F82-B222-A41128C0BB8B in amending Authorized rerson(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
AMBR	Dominick Casale	111 Commercial Blvd.	□Add
		Lauderdale By-The-Sea, FL 33308	■Remove
			□Change
AMBR	Juan C. Herrera, Trustee	2601 E. Oakland Park Blvd, Suite 203	
		Fort Lauderdale, FL 33306	≡ Remove
			□Change
AMBR	ROFORT NO. 3. LLC	771 Sand Creek Circle	⊡Add
		Weston, FL 33327	■Remove
			□Change
MGR	Dominick Casale	111 Commercial Blvd.	≡ Add
		Lauderdale By-The-Sea, FL 33308	□Remove
			□Change
MGR	Juan C. Herrera	2601 E. Oakland Park Blvd. Suite 203	≣ Add
		Fort Lauderdale, FL 33306	□Remove
			□Change
MGR	Julian Fortoul	771 Sand Creek Circle	■Add
		Weston, FL 33327	□Remove
			□Change

													
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record spe l is filed.	cifies a dela	iyed effect	iive date, b	ut not a	ın effecti	ive time	, at 12:0	1 a.m. o	the earli	er of: (b)	The 90th	ı day after ı	the
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-					analous -		Signed by:	11.	<u> </u>				
			Signatur	c or a me	emper or	authoriz	сатергев	cntauve o	f a member	•			

Filing Fee: \$25.00