

**L23000201619**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H24000203155 3)))



H240002031553ABCW

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.**  
Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850)617-6383

From:

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

2024 JUN 11 PM 1:19  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**Email Address:** \_\_\_\_\_

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
MHP LEE I MANAGER, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY

JUN 12 2024

**AMENDMENT TO  
ARTICLES OF ORGANIZATION  
OF MHP LEE I MANAGER, LLC**

**FILED**  
2024 JUN 11 PM 1:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned, on behalf of MHP LEE I MANAGER, LLC, a Florida limited liability company (the "**Company**"), desiring to amend the Articles of Organization of the Company pursuant to the terms of Chapter 605, Florida Statutes, the Florida Revised Limited Liability Company Act (the "**Act**"), states as follows:

1. The current name of the Company is MHP Lee I Manager, LLC.
2. The original Articles of Organization of the Company were filed with the Florida Department of State on April 21, 2023, with an effective date of April 19, 2023, and assigned document number L23000201619 (the "**Articles**").
3. The Articles are amended by deleting Article IV in its entirety and replacing it with the following:

**Article IV. Registered Agent**

The name and address of the Company's registered agent is:

CORPORATE CREATIONS NETWORK INC.  
801 US HWY 1  
N PALM BEACH, FL 33408

4. The Articles are further amended by deleting Article V in its entirety and replacing it with the following:

**Article V. Membership**

The names and addresses of the current members of the Company are:

<u>Name</u>	<u>Address</u>
W. Patrick McDowell 2001 Trust	777 Brickell Avenue, Suite 1300 Miami, Florida 33131
Shear Holdings, LLC	777 Brickell Avenue, Suite 1300 Miami, Florida 33131

5. The Articles are further amended by deleting Article VI in its entirety and replacing it with the following:

Article VI. Management

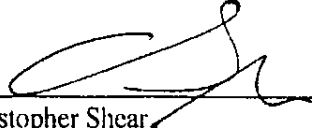
This will be a manager-managed company. The names and addresses of the current managers of the Company are:

<u>Name</u>	<u>Address</u>
W. Patrick McDowell 2001 Trust	777 Brickell Avenue, Suite 1300 Miami, Florida 33131
Shear Holdings, LLC	777 Brickell Avenue, Suite 1300 Miami, Florida 33131

6. This Amendment to the Articles of Organization of the Company was approved by the members and managers of the Company.

IN WITNESS WHEREOF, the undersigned has executed this Amendment the 6<sup>th</sup> day of June, 2024.

Shear Holdings, LLC, a Florida limited liability company

  
\_\_\_\_\_  
Christopher Shear  
Manager

FILED

2024 JUN 11 PM 1:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# **CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is MHP Lee I Manager, LLC.

2. The name and address of the registered agent and office is:

CORPORATE CREATIONS NETWORK INC.  
801 US HWY 1  
N PALM BEACH, FL 33468

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Dated the \_\_\_\_ day of \_\_\_\_\_, 2024.

Name: \_\_\_\_\_  
Title: \_\_\_\_\_

Kevin Duteau  
Special Secretary



SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2024 JUN 11 PM 1:19

FILED