## L23000223033

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(Address)
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(City/State/Zip/Phone #)
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(Document Number)
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To: Department Of State, Division Of Corporations

From: Alexxis Weiland-Sorenson

Ext: 61592 Date: 11/08/23 Order #: 1308397-2

Re: Alafia Mhp 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:

12000000195

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.

## **COVER LETTER**

Registration Section Division of Corporations

TO:

eun iezer.	Alafia MH					
SUBJECT:		Name of Lim	ited Liability Company			
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspo	ondence concerning this matter	to the following:			
		Robyn Tuerk				
			Name of Person			
		Philips International				
		<u> </u>	Firm/Company			
		40 Cutter Mill Road, Suite	405			
		-	Address			
		Great Neck, New York 11	021			
		<del></del>	City/State and Zip Code			
		rtuerk@pihc.com		•		
		E-mail address: (	to be used for future annual report no	otification)		
For further in	iformation c	oncerning this matter, please c	all:			
Robyn Tuerk			212 951-3801 at ()			
Name of Person			Area Code Dayti	me Telephone Number		
Enclosed is a	check for th	ne following amount:				
□ \$25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Reg Div P.O	ling Addres gistration S vision of C D. Box 632 lahassee, I	Section orporations 7	Street Address: Registration S Division of Co The Centre of 2415 N. Monr	orporations		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Alafia MHP LLC

2023 NOV -8 AM II: 57

(Name of the Limited Liability C	nited Liability Company)	TALLAHASSEE FLORID	
The Articles of Organization for this Limited Liability Com Florida document number 1.23000223033	pany were filed on May 4, 2023	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	l liability company here:		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC"	or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		<del></del>	
Principal office address MUST BE A STREET ADDRES	<u> </u>		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·	
Manning dames of 12/12 12 11 1 0 0 1 0 2 1 1 0 0 1 1 1			
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:  Name of New Registered Agent:	ffice address on our records, <u>enter t</u> l	ne name of the new registered	
New Registered Office Address:			
	ice Address:  Enter Florida street address		
	, Flor	ida	
	City	Zip Code	
New Registered Agent's Signature, if changing Registered Agent and browns of all statutes relative to the proper and compacted the obligations of my position as registered agent peing filed to merely reflect a change in the registered of company has been notified in writing of this change.	d agree to act in this capacity. I furt plete performance of my duties, and t as provided for in Chapter 605, F.	' I am familiar with and S. Or, if this document is	
1	f 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	Andrew Leifer	40 Cutter Mill Road, Suite 405	≣Add
		Great Neck, New York 11021	□Remove
			Change
		<u></u>	□Remove
			□Change
			□Add
			□Remove
		<del></del>	□Change
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			□Remove
			☐Change
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<b>Tective date, if other than the</b> an effective date is listed, the date munter of the date inserted in this blocument's effective date on the D	st be specific at ock does not	nd cannot be pi meet the app	rior to date of dicable statu	liling or more t	(op han 90 days af quirements, t	ter ming.) rurs	uant to 60 not be lis	5.020 ted a
ecord specifies a delayed effectivis is filed.							h day afte	er the
November 8		2023	·					

Filing Fee: \$25.00