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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GREENBERG TRAURIG (ORLANDO)

Account Number : 103731001374 Phone : (407)418-2435 Fax Number : (407)420-5909

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.
nhill@codina.com

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CCK WESTLAND LAND, LLC

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T. LEMIEUX

JUL 17 2023

2

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

CCK WESTLAND LAND, LLC

♥ • ' ' ' ' ' ' O)F	
CCK WESTLAND LAN	ND. LLC	
(Name of the Limited Liability Compa (A Florida Limited I	•	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on05/09/2023 and assigned	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	2020 SALZEDO STREET 5TH FL	
(Principal office address MUST BE A STREET ADDRESS)	CORAL GABLES, FL 33134	
Enter new mailing address, if applicable:	2020 SALZEDO STREET 5TH FL	
(Mailing address MAY BE A POST OFFICE BOX)	CORAL GABLES, FL 33134	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	address on our records, enter the name of the new registers	
	Florida	

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.

City

Page: 3 of 4

2023-07-14 09:50:55 EDT

14076508411

From: Heather Irving

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

To: 18506176383•

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Title	<u>Name</u>	Address	Type of Action
MGR	CODINA MANAGER, LLC	2020 SALZEDO STREET, 5TH FL	≣Add
		CORAL GABLES, FL 33134	□Remove
			□Change
			□Add
			□Remove
			©Change
			□Add
		□Rémové	
			Change
			□Add
			□Remove
			☐ Change
			□Add
		□Remove	
			□ Change
			□Add
			□Remove
44444	200 ((051 0)))		Change

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	1. ADD EIN: 93-1394654
•	
•	
4	
	JULY 15, 2023
(If an ef Note:	(optional) fective date, if other than the date of filing: (optional) fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
e recor	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ided.
Dated	July 14, 2023
	/s / Jose M. Ameney. Signature of a member or authorized representative of a member
	Jose M. Jimenez, VP of Manager
	Typed or printed name of signee