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(((H23000223273 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SERBER & ASSOCIATES, P.A.

Account Number : 120000000083 Phone : (305)932-6262 Fax Number : (305)933-9393

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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SORRENTO HARBOUR LLC

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P.002/004 H230=223213

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SORRENTO HARBOUR LLC		
(Name of the Limited Liability Compar (A Florida Limited L	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company	vere filed on 06/13/2023	and assigned
Florida document number L23000283704		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company bere:	
The new name must be distinguishable and end with the words "Limited Liabil	ity Company," the designation "LLC" or the al	obreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	100	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered offi	ce address on our records enter t	he name of the se
registered agent and/or the new registered office address here:	ee addicas on our records, enter t	ne name of the ne
Name of New Registered Agent:		-
New Registered Office Address:	-	•
	Enter Florida street address	35
	Florida	
	City Florida	Zip Code:
New Registered Agent's Signature, if changing Registered Agent:		\mathcal{R}
hereby accept the appointment as registered agent and agree	to act in this capacity. I further agree	e to comply with th
provisions of all statutes relative to the proper and complete p	erformance of my duties, and I am fa	miliar with and
accept the obligations of my position as registered agent as pro-	ovided for in Chapter 605, F.S. Or, ij	this document is

If Changing Registered Agent, Signature of New Registered Agent

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 amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	TORRES RAMOS, ANDRES ARTURO	2875 NE 191ST ST	🗆 Add
		STE 801	■ Remove
		AVENTURA, FL 33180	
MGR	TORRES ESCALERA, JOSEMARIA	2875 NE 191ST ST	—— □ Add
		STE 801	= Remove
		AVENTURA, FL 33180	
MGR	LUGANO HARBOUR LLC	2875 NE 191ST ST STE 80	— 1 ■ Add
		STE 801	Remove
		AVENTURA, FL 33180	Acino ic
			Remove
			_
			_D Add
			_ Remove
			_
 -			_□ Add
			_□ Remove

If amending any other information, ent	er change(s) here: (Attach a	dditional sheets, if necessary.)
		·
Effective date, if other than the date of if (The effective date must be specific, cannot be prior the date this document is filed by the Florida Depart	to date of receipt or filed date and ca	(optional) anot be more than 90 days after
Dated June 22th	2023	
Mul		
Signature	of a member or authorized represen	tative of a member
Niall Sanin		
· 	Typed or printed name of sign	nee

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