

200415813702

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

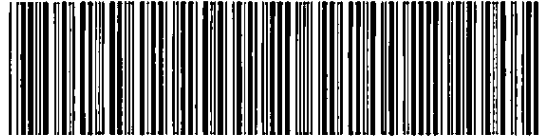
(Document Number)

Certified Copies _____

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Special Instructions to Filing Officer:

Office Use Only



200415813702

2023 SEP 20 PM 12:40

DEPT. OF STATE
DIVISION OF CORPORATE REGISTRATION

ALLAHASSEE, FLORIDA

2023 SEP 20



CSC - Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: 61594

To: Department Of State, Division Of Corporations
From: Eyliena Baker
Ext: 61594
Date: 09/20/23
Order #: 1276632-1
Re: Dolger Surfside LLC
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Amount to be deducted from our State Account: \$55.00 - FL State Account Number
120000000195 Authorization:

Please take the following action:

File in your office on basis
Issue Proof of Filing
Issue Certified Copy.

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CLERK OF STATE
DIVISION OF CORPORATIONS

Special Instructions:

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

TO: Registration Section
Division of Corporations

SUBJECT: Dolger Surfside LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Yehuda Frid

Name of Person

George D. Perlman P.A.

Firm/Company

1441 Brickell Ave, Suite 1400

Address

Miami, FL 33131

City/State and Zip Code

corporatefilings@gplawintl.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Yehuda Frid

305

3745646

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing 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)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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STATE OF FLORIDA
DIVISION OF CORPORATIONS

10
**ARTICLES OF ORGANIZATION
OF**

Dolger Surfside LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 08/08/2023 and assigned
Florida document number 123000371900.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Dolger Highland Park LLC

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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

FILED
DIVISION OF CORPORATIONS
2023 SEP 20 PM 12:40

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

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

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

2023 SEP 20 PM 12:40
DIVISION OF STATE
RECORDS

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

2023 SEP 20 PM 12:40

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective 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 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated September 19, 2023



Signature of a member or authorized representative of a member

Yehuda Frid

Typed or printed name of signee