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Florida Department of State on of Corporation

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(((H23000408204 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COHEN, NORRIS, WOLMER, RAY, TELEPMAN & COHEN

Account Number : I20020000140 Phone : (561)844-3600

Fax Number : (561)842-4104

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. Email Address: LRO Cohen Norris. com

· · · LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 5155 NORTHLAKE BLVD, LLC

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TO: I	Registration Sec Division of Corp	tion Sgrations	• "A•		
51 M M A		HLAKE BLVD, LLC			
SUBJEC	1;	Name of Lim	ited Liability Company		
The enclo	sed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please ret	um all correspo	ndence concerning this matter	to the following:		
		peter r. ray, esq.			
			Name of Person		
		COHEN NORRIS WOLM	ER RAY TELEPMAN BERKOWITZ & COHEN		
			Firm/Company		
		712 U.S. HIGHWAY ONE	E, SUITE 400		
		NORTH PALM BEACH, FL 33408			
			City/State and Zip Code		
LR@COHENNORRIS.COM E-mail address: (to be used for future annual report notification)					
For furth	er information co	oncerning this matter, please co	·		
Karin Dr			561 844-3600		
	Name of	Person	at () Area Code Daytime Telephone Number		
Enclosed	is a check for th	c following amount:			
≅ \$2 5,6	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S\$5.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)		
	Mailing Address Registration S Division of C P.O. Box 632 Tallahassee, F	section orporations 7	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroc Street, Suite 810 Tallahassee, FL 32303		

TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our records. imited Liability Company)	
The Articles of Organization for this Limited Liability Con Florida document number L23000375700	mpany were filed on <u>08/09/2023</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	ed 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 ADDRE	(2.23	
		<u> </u>
		ب
Enter new mailing address, if applicable:		<u></u>
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, <u>enter t</u> l	he name of the new reg
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flor	ida

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

11-29-23 03:50an Fromor removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	KENNETH W. BOWDEN	1858 A ROAD	■Add
		LOXAHATCHEE, FL 33470	□Remove
			☐ Remove
			□Change
			□Add
			□Remove
			□ Change
			□Remove
			Change
			CAdd
			□Remove
			□Change
			□Add
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			☐ Change

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Note:	ive date, if other than the date of filing: (optional) ective 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 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records.
recor d is fi	d 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 led.
Dated	NOVEMBER 29 2028
	<i>[/</i>
	Signature of a member or authorized representative of a member