From: Alexander Englard

1/12/24, 10:37 AM

Division of Corporations

## Florida Department of State

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000017193 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INTERSTATE FILINGS LLC

Account Number : I20110000086 Phone : (718)569-2703 Fax Number : (718)504-7890

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

Email Address: ORDERS@INTERSTATEFILINGS.COM

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JAX FL HOLDCO LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help 3.1113 2029

From; Alexander Englard

To:

2024-01-12 15:41:09 GMT (((H240000171933)))

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JAX FL HOLDCO LLC		
(Name of the Limited L.	ability Company as it now appears on our records.) orida Limited Liability Company)	All States And the visit of the
The Articles of Organization for this Limited Liabili Florida document number <u>L23000430116</u>	ity Company were filed on 09/14/2023	and assigned
This amendment is submitted to amend the following	<b>g</b> :	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "U,C" or the	abbreviation "L. InC"
Entra your principal officer address if anotionly		<b>72</b>
Enter new principal offices address, if applicable		
(Principal office address MUST BEA STREET A)	DORESS)	
	40,000	- <del>&gt;</del> - N
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	4	-F≥ 5
United Waters Prat DE AT OUT OF FIELD BOX		<u> </u>
B. If amending the registered agent and/or regist agent and/or the new registered office address he  Name of New Registered Agent:		me of the new registered
New Registered Office Address:	Enter Florida street eddress	
	, Florida _	Zip Code
	•	ng cant
New Registered Agent's Signature, if changing Regist		
I hereby accept the appointment as registered ag provisions of all statutes relative to the proper an accept the obligations of my position as registere being filed to merely reflect a change in the regis company has been notified in writing of this chan	nd complete performance of my duties, and I am d agent as provided for in Chapter 605, F.S. Or tered office address, I hereby confirm that the I	glamiliar with and r, if this document is
	If Changing Registered Agent, Signature of New R	egistered Agent

Ta:

(((H24000017193.3)))

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>	Name	Address	Type of Action
MGR	SCHOENFELD, ROBERT	3512 QUENTIN ROAD	[]Add
		BROOKLYN, NY 11254	≣Remove
			☐ Change
MBR	FL HC INSTITUTE OPCO LLC	3512 QUENTIN ROAD, SUITE 200	≣Ađd
		BROOKLYN, NY 11234	<u>O</u> Remove
			□Change
		□Add	
		□Келюче	
			[]Change
		①Add	
			П Келюче
		Change	
	41.00 mm	DAdd	
			DRemove
			U Change
			DbbA 📗
			□Remove
			EI/Dunna

From: Alexander Englard

(((1124000017193.3)))

	*******
	<del></del>
	~~
	_
	<del>_</del>
	-
	_
	_
	_
E. Effective date, if other than the date of filing:  (If an effective date is fisted, the date must be specific and common be prior to date of filing or more than 90 days after filing.) Pursuant to the Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be focurious's effective date on the Department of State's records.	05.0207 (3)( isted as the
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 alrecord is filed.	ter the
Dated January 9th 2074	
Signature pl' a thember or authorized representative of a member	
ROBERT SCHOENFELD	

Filing Fee: \$25.00