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(((H23000430630 3)))



H230004306303ABCV

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From:

Account Name : COGENCY GLOBAL, INC.

Account Number : 120000000088 Phone : (800)221-0102 Fax Number : (800)944-6607

ö

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

♯ LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GRAMPS BY THE SEA POP LLC

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T. ILEMIEUX DEC 20 2023

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From: Xavian Brown

Kax; 18002210102

Fax: (850) 617-6383

Page: 2 of 4 12/18/2023 5:28 PM

H23000430630 3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Gram	ps By the Sea Pop LLC
(<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 Cor Florida document number <u>L23000514243</u>	mpany were filed on November 14, 2023 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	d 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	(SS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered of agent and/or the new registered office address here: Name of New Registered Agent:	office address on our records, enter the name of the new registered
New Registered Office Address:	
	Enter Florida street address
	City Sip Code 3
New Registered Agent's Signature, if changing Registered 2	·
	•
provisions of all statutes relative to the proper and con accept the obligations of my position as registered age	nd agree to act in this capacity. I further agree to comply with the implete performance of my duties, and I am familiar with and int as provided for in Chapter 605, F.S. Or, if this document is office address, I hereby confirm that the limited liability
	If Changing Registered Agent Signature of New Registered Agent

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From: Xavian Brown Fax: 18002210102 To: Fax: (850) 617-6383 Page: 3 of 4 12/18/2023 5:28 Fax: 18002210102 To: Fax: (850) 617-6383 Page: 3 of 4 12/18/2023 5:28 Fax: 18002210102 To: Fax: (850) 617-6383 Page: 3 of 4 12/18/2023 5:28 Fax: (850) 617-6383 Page: 3 of 4 12/18/2023 Page: 3 of 4 or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
<u>AMBR</u>	Aabad Melwani	3301 Rickenbacker Marina	□Add
		Key Biscayne, FL 33149	ZRemove
			☐ Change
			□Add
		□ Remove	
	. ———		
			□Remove
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u am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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ote:	ive date, if other than the date of filing:
recoi l is fi	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 led.
ated	<u>December 18</u> , <u>2023</u>
	v (Alternative Contraction of the Contraction of th
	Signature of a member or authorized representative of a member
	Adam Gersten
	Typed or printed name of signee

Filing Fee: \$25.00