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COVER LETTER

	Registration So Division of Co			
CHD IECT	YMP Mira	mar LLC		
SUBJECT	l:	Name of Lim	ited Liability Company	
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retu	ırn all correspo	ondence concerning this matter	to the following:	
		Sam Potter		
			Name of Person	
		YMP Real Estate Manager	ment	
			Firm/Company	
		4500 N State Road 7, Suite	2 100	
		 	Address	
		Lauderdale Lakes, FL 333	19	
		spotter@ymprealestate.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report no	otification)
For further	r information c	concerning this matter, please c	all:	
Sam Potte	г		508 958-7251	
	Name o	of Person	at () Area Code Dayt	ime Telephone Number
Enclosed i	s a check for th	he following amount:		
■ \$25.00	9 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)
	Iniling Addres		Street Address: Registration S	Section
D	Division of C	Corporations	Division of C	orporations
P	O. Box 632	27	The Centre of	Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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

YMP Miramar LLC

		liability Company)	
The Articles of Organization for this Limited Liab	oility Company	were filed on February 22, 2024	and assigned
Florida document number 1.24000094344	·		
This amendment is submitted to amend the follow	ving:		
A. If amending name, <u>enter the new name of t</u>	he limited liab	ility company here:	
he new name must be distinguishable and contain the wor	ds "Limited Liabi	ity Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		2901 SW 149th Avenue	
Principal office address MUST BE A STREET ADDRESS)		Suite 110	
		Miramar, Florida 33027	· · ·
Mailing address MAY BE A POST OFFICE BO B. If amending the registered agent and/or reg gent and/or the new registered office address	istered office :	address on our records, <u>enter</u> (he name of the new regi
Name of New Registered Agent:			· -
Name of New Registered Agent: New Registered Office Address:	4500 N State R	oad 7, Suite 100	
	4500 N State R	Enter Florida street address	
	4500 N State R	Enter Florida street address	rida <u>33319</u> Zip Code

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.

18 Changing Registered Agent Signature of

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
VP Sam Potter	Sam Potter	4500 N State Road 7	≣ Add
		Suite 100	□Remove
		Lauderdale Lakes, Fl. 33319	□Change
	·		□Add
			□Remove
			□Change
 .			□Add
			□Remove
			☐Change
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			☐ Change
			□Add
			□Remove
			□ Change

	
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If an effective dat	, if other than the date of filing:
document's eff	ective date on the Department of State's records.
e record specifi	es a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
rd is filed.	to a doing to enterine date, out not an effective time, at 12.01 a.m. on the carnet of. (b) The 90th day after the
Dated 3	126/24
	Signature of a member or authorized representative of a member
	·
San	n Potter
	Typed or printed name of signee

Filing Fee: \$25.00