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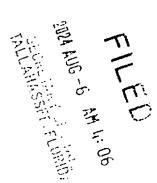
To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 : (561)694-8107 Fax Number : (561)214-8442



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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
2024 AUG-6 AH 4: 06
TALLAHASSEF FLORIO,

SAMANA SEVEN, 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	and assigned
Florida document number L24000107707			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity compa	any here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Campany	"the decimation "LEC" or the	subhraniarian "LLC"
·	ry Company.	. the designation leave of the	tannevación tatae.
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)			
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on	our records, <u>enter the n</u>	ame of the new registered
Name of New Registered Agent:			
New Registered Office Address:			
real registered critice requests.	Ent	ter Florida street address	
		, Florida	Zip Code
	Cuy		Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performan rovided fo	ice of my duties, and La or in Chapter 605, F.S. C	m familiar with and Fr, if this document is

If Changing Registered Agent, Signature of New Registered Agent

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>	<u>Name</u>	Address	Type of Action
MGR	Eduardo Torrealba	175 SW 7th Street	≘Add
		Suite 1400	[]]Remove
		Miami, Fl. 33130	[]Change
AMBR	Starshower Associates, Inc	175 SW 7th Street	■Add
		Suite 1400	□Remove
		Miami, FL 33130	Change
			□Add
			DRemove TALLAHASSELFLOWD
			G Remarke B Change
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			□Remove
			Change
	ANNUAL MANAGEMENT OF THE STATE		
			Remove
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Effective date, if other than the d (If an effective date is listed, the date must b <u>Note:</u> If the date inserted in this bloc document's effective date on the Dep	se specific and o k does not me	cannot be prior eet the applica				.) Pursuant to 6	
he record specifies a delayed effective ord is filed.	date, but not a	an effective til	ne, at 12:01 a	.m. on the earlie	erof:(b) Ti	ie 90th day at	ier the
Dated August 2nd	<u> </u>	2024					
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