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To:

Division of Componations

Fax Number : (850)617-6383

From:

Account Name : ZIMMERMAN, KISER, & SUTCLIFFE, P.A.

Account Number : I19990000006 : (407)425-7010 Fax Number : (407)425-2747

> **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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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SITES OF TAMPA LLC

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Help

K. SALY

AUG 23 2024

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



SITES OF TAMPA 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 Florida document number <u>L24000108513</u> .	were filed on March 4, 2024 and assigned			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	6000 Metrowest Boulevard, Suite 101 Orlando, FL 32835			
(Principal office address MUST BE A STREET ADDRESS)				
Enter new mailing address, if applicable:	6000 Metrowest Boulevard, Suite 101			
(Mailing address MAY BE A POST OFFICE BOX)	Orlando, FL 32835			
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new regist			
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida street oddress			

New Registered Agent's Signature, if changing Registered Agent:

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.

City

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 ¹
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Warren Family Holdings I, LLC	5206 NW 16th Avenue, Suite 1	bbA□_
		Gainesville, FL 32601	≣Remove
			□ Change
MGR	Bamberg Investments, LLC	6000 Metrowest Boulevard, Suite 101	= Add
		Orlando, FL 32835	□Remove
			□ Change
			Change CALLANS S
			O D Remove
			Add 22 Remove
			□Reimove
			JAdd
			□Remove
			🗀 Change
			DAdd
			□Remove
			□Change

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f amending any other informa	tion, enter change(s	i) here: <i>(Attach add</i>	litional sheets, if nece.	ssary.)
				
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Effective date, if other than the fun effective date is listed, the date mu Note: If the date inserted in this b locument's effective date on the E	st be specific and cannot t lock does not meet the	be prior to date of filing applicable statutory	iling requirements, this	filing.) Pursuant to 695.020 date will not be listed a
record specifies a delayed effecti d is filed.	e date, but not an effe	ctive time, at 12:01 a	m. on the earlier of: (b)	The 90th day after the
Dated August 22	2014	2		!
/.	WH/_	~ ~ .		į
	Signature of a member	or authorized represent	tive of a member	
Alex Rœce				

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Filing Fee: \$25.00