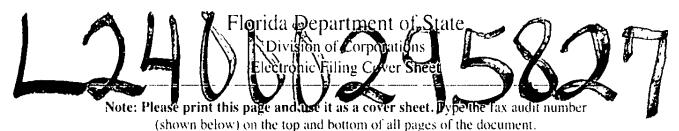
7/23/24, 9,48 AM

Division of Corporations



(((H24000248774 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

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.\*\*

J J				
<b>Email</b>	Address:	 		
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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SBG APPLE CENTRAL I, LLC

Certificate of Status	0
Certified Copy	0
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M. SOLOMON

JUL 2 4 2024

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Help

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) .nability Company)	<u> </u>	
The Articles of Organization for this Limited Liability Company Florida document number 1.24000295827	were filed on	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 Liabil	lity Company," the designation "LLC" o	r the abbreviation "Ld:C;" 💍 🧲	
Enter new principal offices address, if applicable:		r the abbreviation "LateC." 224	
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:		COF ST	
• • • • • • • • • • • • • • • • • • • •			
(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:	address on our records, <u>enter th</u>	e name of the new registere	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	, Florida		
	Cny	Zip Code	
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre			

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.

II 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>	Name	Address	Type of Action
MGR	PNX MANAGEMENT, LLC	12540 W. ATLANTIC BLVD	ÜAdd
		CORAL SPRING, FL 33071	
			☐ Change
MGR	PNX ADMIN, LLC	12540 W. ATLANTIC BLVD	<b>≅</b> Add
		CORAL SPRING, FL 33071	□Remove
			□Change
			□Add ≓o: <b>ਵ</b>
			SECRETARY  OR MANAGEMENT AREA  OR MANAGEMENT A
			OF STATE
			_
			☐ Change
			□Add
			□ Remove
			☐ Change
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		□Add
			□Remove
			□ Change

:	!
}	F
2	

/s/ Kunning Ch	en Signature of a member or author			
Dated July 22nd	, 2024			
ne record specifies a delayed effection of is filed.	ve date, but not an effective ti	ime, at 12:01 a.m. on the	earlier of: (b) The 90t	h day after the
(If an effective date is listed, the date mu Note: If the date inserted in this b document's effective date on the I	ist be specific and cannot be prior flock does not meet the applie	able statutory filing requ	in 90 days after filing.) Purs	
Effective date, if other than th	e date of filing:		(optional)	
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Typed or printed name of signee