## L24000330973

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Division of C	orporations		
	M PROPERTY ONE LLC		
SUBJECT:	Name of Lim	ited Liability Company	_
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	pondence concerning this matter	to the following:	
	PATRICK H. RAYNOR		
		Name of Person	<del></del>
	NEWHAM PROPERTYC	NE LLC	
		Firm/Company	<del>_</del>
	1850 NE 118TH RD.		
		Address	<del></del>
	NORTH MIAMI, FLORII	DA 33181	
		City/State and Zip Code	<del></del>
	PRAYNOR93@GMAIL.Co	OM to be used for future annual report notification)	_
For further information	concerning this matter, please ca		
PATRICK H. RAYNO	R	508 479-1980 at ( )	
Name	of Person	Area Code Daytime Telephone Nun	iber
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certif (additional copy is enclosed) Certif	) Filing Fee. Teate of Status & Ted Copy Outal copy is enclosed)
Mailing Addr Registration		Street Address: Registration Section Division of Corporations	) to   

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

TO:

**Registration Section** 

P.O. Box 6327

Tallahassee, FL 32314

Carlotte Car

## IU ARTICLES OF ORGANIZATION OF

NEWHAM PROPERTY ONE LLC

Florida document number 1.24000330973  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  NEWHAM OPCO LLC  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  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 address on our records, enter the name of the new regagent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address	(Nume of the Limited	Florida Limited Liabil	ity Company)	orux)
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Enter Florida street address	New Registered Office Address:			
Florida			Enter Florida street ada	lress
	_			Florida
City Zip Code			City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	New Registered Agent's Signature, if changing Reg	istered Agent:		
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply we 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 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.	provisions of all statutes relative to the proper accept the obligations of my position as registe being filed to merely reflect a change in the reg	and complete perj red agent as prov gistered office add	formance of my duties, ided for in Chapter 60	and I am familiar with and 5, F.S. Or, If this documen <u>t is</u>

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## MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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Effective date, if other that an effective date is listed, the Note: If the date inserted in document's effective date of	date must be specific a n this block does not	and cannot be prior to t meet the applical	o date of filing or mor ble statutory filing	(option te than 90 days after fit requirements, this d	ing.) Pursuant	to 605.0207 oc listed as
e record specifies a delayed rd is filed.	effective date, but n	ot an effective tin	ne, at 12:01 a.m. or	the earlier of: (b)	The 90th day	
Dated September 27		2024	<del>-</del> -			624 OCT -4
	A Jane	A	- 	<b></b>	SSEE	PK
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