Fax: 8134365206 9/24/2024 13:09.19 PDT To: 18506176383 Page: 1/4

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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 ORLANDO HILLTOP MHP LLC

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M. SOLOMON

SEP 3 0 2024

9/24/2024 13.09:19 PDT To: 18506176383 Page: 2/4 Fax: 8134365206

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Orlando Hilltop MHP LLC				
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I.	ny as it now appears on our records.) Jability Company)			
The Articles of Organization for this Limited Liability Company were filed on 09/02/24 and assig Florida document number L24000384389				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabi	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" o			
Pater and adjust offices address if applicables		202 4		
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)		10		
				
		တ္တြင္း 🔀 🛅		
Enter new mailing address, if applicable:		$m_{ij} = \mathfrak{I}$		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>		
		41:		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	iddress on our records, <u>enter th</u>	e name of the new registered		
Name of New Registered Agent.				
New Registered Office Address:	Enter Florida street address			
	. Florida			
·	City	Zip Code		
New Registered Agent's Signature, if changing Registered Agent:				
	and the state of t			
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office	performance of my duties, and provided for in Chapter 605, F.,	I am familiar with and S. Or, if this document is		

company has been notified in writing of this change.

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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	PALM EROS LLC	7901 4TH ST N STE 300	🗆 Add
		ST. PETERSBURG, FL 33702	[X]Remove
			[]Change
MGR	Palm Eros Manage Co LLC	7901 4TH ST N STE 300	∑ IAdd
		ST. PETERSBURG, FL 33702	□Remove
			□Change
			□ Add ∵ ;(f):
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Effective date, if other that an effective date is listed, the	han the date of	filing:			_ (optional)			
Note: If the date inserted is document's effective date of	H THIS DIOCK GOES	s not meet me a	ppricable statute	ing or more than 90 d ny filing requireme	lays ofter filing.) onts, this date) Pursuant will not l	to 605.00 be fisted	207 as
e record specifies a delayed rd is filed.	effective date, b	ut not an effect	ive time, at 12:0	H a.m. on the earlie	er off (b) The	e 90th da	y after tl	he
Dated September 2	4th	2024	1					
	1/7/	1-	Cw	1/1/1	'n/			

Typed or printed name of signee