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To:

Division of Corporations Fax Number : (850)617-6383

From:

Account Name : PERLMAN, BAJANDAS, YEVOLI, & ALBRIGHT P.L. Account Number : I20040000167 Phone : (305)377-0809 Fax Number : (305)377-0781

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ACQUALINA 3105 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 <u>11/20/2024</u> and assigned Florida document number <u>L24000488109</u>

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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 registered agent and/or the new registered office address here:

		-
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	<u></u>
	City	Zip Code C

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.

If Changing Registered Agent, Signature of New Registered Agent

٢....

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
MĜR	Sebrina Sibilo	2218 SW 72 AVE	EAdd
		DAVIE, FL 33317	🖸 Remove
			□Change
			🗖 Add
			□Change
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ective date, if other than the date of filing:	(optional)

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

If the record specifies a delayed effective date, but not an effective time, at 12:01 u.m. on the earlier of: (b) The 90th day after the record is filed

Dated	anuary 3 2025
	a formet 71
	Signature of amember of authorized representative of a member
	Emma R. Femandez, Authorized Representative
	l'yped or printed name of signoe