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To:

: (850)617-6383 Fax Number

From:

Account Number : COMPUTERSMARE Account Number : 118432083653 Phone : (561)694-8187 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.◆◆

Emmil Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 4810 NBR LLC

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Help

Docusign Envelope ID: 5F5104C6-3DE2-451C-984F-8AEEFCB3A52A

ARTICLES OF AMENDMENT

TO ARTICLES OF ORGANIZATION **OF**

4810 NBI	R LLC		
(Name of the Limited Liability Compa (A Florida Limited)	iny as it now appears on o Liability Company)	ur records.)	
The Articles of Organization for this Limited Liability Company	were filed on February	18, 2025	and assigned
Florida document number L25000083198			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
4810 NBR Manager LLC			
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designa	tion "LLC" or the s	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:			202
(Mailing address MAY BE A POST OFFICE BOX)		·	
	···	<u> </u>	2 7
B. If amending the registered agent and/or registered office a	address on our record	s, <u>enter the na</u>	me of the new registere
agent and/or the new registered office address here:			70807 71.55 71.15
Name of New Registered Agent:			
New Registered Office Address:	Enter Floridu str	ast address	
	Line i ninuu sii	ter duaress	
	City	, Florida _	Zip Code
	Сиу		гір Сош

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.

Docusign Envelope ID: 5F5104C6-3DE2-451C-984F-8AEEFCB3A52A
11 amenuing Authorized rerson(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>	<u>Name</u>	<u>Address</u>	Type of Action
	<u> </u>		□Add
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			□ Remove
			☐Change

fective date, if other than the date of filing: (optional) In effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ecument's effective date on the Department of State's records. The specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed. The specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed. The specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed. The specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed. The specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed. The specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed.	 -				
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1 -	Signed by:				
Signature of a member or authorized representative of a member	, -	,			
	—— BOOOM () 1704 (ignature of a member or author	rized representative of	a member	
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