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SECTIONARY OF STATE

COVER LETTER

TO: Registration of	on Section Corporations		•
RYAN SUBJECT:	'S COURT LLC		:
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Article	s of Amendment and fee(s) are su	bmitted for filing.	
Please return all corr	respondence concerning this matte	r to the following:	
	CYNTHIA J AREVALO	. ESQ	
		Name of Person	
	AREVALO LAW		
		Firm/Company	
	4000 HOLLYWOOD BL	VD.	
		Address	14
	SUITE 265 SOUTH		
		City/State and Zip Code	······································
	HOLLYWOOD, FL 33021		
For further information	on concerning this matter, please of	(to be used for future annual report no eall:	Otthication)
CYNTHIA J AREV	ALO, ESQ.	954 3672327	
Nar	ne of Person	Area Code Dayti	me Telephone Number
Enclosed is a check f	or the following amount:		
■ \$25.00 Filing Fee	e S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
P.O. Box 6	on Section f Corporations	Street Address: Registration S Division of Co The Centre of 2415 N. Monr	orporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

RYAN'S COURT LLC					
(Name of the Limited (A	Liability Comp Florida Limited	any as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liab Florida document number M21000001868	oility Company	were filed on 02/16/2021 and assigned			
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of the	he limited lial	pility company here:			
N/A					
The new name must be distinguishable and contain the word	ds "Limited Liab	lity Company," the designation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:		4000 HOLLYWOOD BLVD			
(Principal office address MUST BE A STREET		SUITE 265S			
	· · · · · · · · · · · · · · · · · · ·	HOLLYWOOD, FL 33021			
Enter new mailing address, if applicable:		SAME			
(Mailing address MAY BE A POST OFFICE BO	<u>)X)</u>				
B. If amending the registered agent and/or reg agent and/or the new registered office address	istered office <u>bere</u> :	address on our records, enter the name of the new registered			
Name of New Registered Agent:	CYNTHIA J A	REVALO, ESQ.			
New Registered Office Address:	4000 HOLLYV	VOOD BLVD, STE 265S (♀ 를)			

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

City

HOLLYWOOD

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

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

Title	<u>Name</u>	Address	Type of Action
AP_	CYNTHIA AREVALO, ESQ.	4000 HLWD BLVD, 265S, HLWD, FL 33021	
			□ Remove
			□Change
			□ Add
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ote. If the date	Tother than the dat listed, the date must be sinserted in this block of ive date on the Depart	does not meet the 2	applicable statuto	ing or more than 90 d ry filing requireme	_ (optional) ays after filing.) Pursuant nts, this date will not b	10 605,020 oc listed as
record specifies	a delayed effective dat	e, but not an effec	tive time, at 12:0	l a.m. on the earlie	r of: (b) The 90th da	y after the
is filed.		2021				
OCT 26		2021				
OCT 26		. 2021	·			
l is filed.	<u> </u>		·	entative of a member		

Filing Fee: \$25.00