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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL

Account Number : 110432003053 Phone : (551)694-8107 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. **

Email	Address:			
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MHP DEVELOPERS II, LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Mar Developers II, LLC		
(Name of the Limited Liability (A Florida	y Company as it now appears on our rec Limited Liability Company)	ords.)
The Articles of Organization for this Limited Liability Co		
Florida document number		<u> </u>
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted Jiability company here:	
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation 'L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRI	ESS)	
		2021
		हा है ग
Enter new mailing address, if applicable:		6 20 7 88
(Mailing address MAY BE A POST OFFICE BOX)		?¹½: > IT
		-0
		<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, <u>ente</u>	r the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre	en e
	F	lorida
	Сіђ	Zip Code

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 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
MBR	Kenneth Les	601 Brickell Key Drive, Ste 700	DAdd
	·	Miami, FL 33131	■Remove
		-	Change
MBR	Michael Lee	601 Brokell Key Drive, Ste 700	
		Miami, FL 33131	
			Change
MBR	Archipelago Housing LLC	601 Brickell Key Drive, Sto 700	■Add
		Miami, Fl 33131	□Remove
	•		□ Change
MGR	Archipelago Housing LLC	601 Brickell Key Drive, Ste 700	\(\overline{\overli
		Miami, FL 33131	□Кетюче
			□Change
MGR	W. Patrick McDowell 2001 Trust	601 Brickell Key Drive, Ste 700	■Add
		Miami, Fl 33131	□ Remove
			©Change
			🖸 Add
			□Remove

					
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ffective date, if other than the can effective date is listed, the date must ote: If the date inserted in this bloom	late of filing:		(optio	nal)	
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ocument's effective date on the Dep	partment of State's records.		oquatometti, tins	date with not peril	sicu as
record specifies a delayed effective is filed.	date, but not an effective ti	me, at 12:01 a.m. on	the earlier of: (b)	The 90th day aft	er the
ated August 19	2021				
	Mars				
<u></u>	ignature of a member or author	rized representative of	member		