7/8/24, 10:34 AM Division of Corporations



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Fax Number : (850)617-6383

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Account Name : COMPUTERSHARE Account Number: 110432003053 : (561)694-8107 : (561)214-8442 Fax Number

nter 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 TREASURE ISLAND DEVELOPMENT CO MEZZ LLC

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10 S 2024 T. LEMIEUX

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Treasure Island Development Co Mezz LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) hability Company)	
The Articles of Organization for this Limited Liability Company	were filed on <u>05/24/2022</u>	and assigned
Florida document number M22000008184		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity 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)		
		<u></u>
Enter new mailing address, if applicable:	<u></u>	· · · · · · · · · · · · · · · · · · ·
Mailing address MAY BE A POST OFFICE BOX)		
		
If amending the registered agent and/or registered office a igent and/or the new registered office address here:	iddress on our records, <u>enter the na</u>	me or the new registered
Name of New Registered Agent:		8
New Registered Office Address:		是四
New Registered Office Address.	Enter Florida street address	- <u> </u>
	. Florida	=
	City	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

<u>Title</u>	Name	Address	Type of Action
Chairman and	Jorge M. Perez	2850 Tigertail Ave	■ Add
		Suite 800	□ Rеточе
		Miami, FL 33133	□ Change
President	Jon Paul Perez	2850 Tigertail Ave	■Add
		Suite 800	□ Remove
		Miami, FL 33133	□ Change
Vice President	Nicholas Perez	2850 Tigertail Ave	■Add
		Suite 800	□Remove
Vice President		Miami, FL 33133	□Cbange
Treasurer Secretary	Matthew J. Allen	2850 Tigertail Ave	■Add
		Suite 800	□Remove
		Miami, FL 33133	□Change
Vice President	Ben Gerber	2850 Tigertail Ave	
		Suite 800	□Remove
		Miami, FL 33133	□Change
Authorized Representative	Amro Zakami	2850 Tigertail Ave	■Add
		Suite 800	□Remove
		Miami, FL 33133	☐ Change

				
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