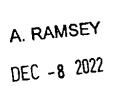
93000045470

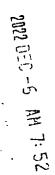
	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
: 	
	Office Use Only





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X002250

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

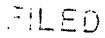
ENTITY NAME <u>TH</u>	E INNS AT COCONU	JT GROVE, INC.
DOCUMENT NUM	BER	
	PLEASE FILE	THE ATTACHED AND RETURN
xxxxxx	Plain Copy	
	Certified Copy	
	Certificate of Status	·
	PLEASE OBTAIN TH	E FOLLOWING FOR THE ABOVE ENTITY
	Certified Copy of A	rts & Amendments
	- ,,	ts & Amendments Complete File (Including Annual Reports)
	Certificate of Status Certificate of Status	Reflecting:
	APOSTILLE'	/ NOTARIAL CERTIFICATION
COUNTRY OF DEST		
NUMBER OF CERTI	FICATES REQUESTED	
	5.00	ACCOUNT # 120160000072 4: 1

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: The Inns at Cocom	ut Grove, Inc.	
DOCUMENT NUN	D02000046470		· · · · · · · · · · · · · · · · · · ·
The enclosed Article	es of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	itter to the following:	
	Jonathan S. Trabitz, Esq.		
		Name of Contact Person	1
	Thomas G. Sherman, P.A.		
		Firm/ Company	
	90 Almeria Avenue		
		Address	
	Coral Gables, FL 33134		
		City/ State and Zip Code	e
	paredes98@yahoo.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, plea	se call:	
Jonathan S. Trabitz		at (305	de & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check to	for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Di P.C	nelling Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section In of Corporations entre of Tallahassee N. Monroe Street, Suite 810 Issee, FL 32303

Articles of Amendment to Articles of Incorporation



2022 DEC -6 AM 7: 52

The Inns at Coconut Grove, Inc.		
(Name	of Corporation as currer	tly filed with the Florida Dept. of State)
P93000045470		
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new n	ame of the corporation:	
		The new
	Corp," "Inc," or "Co".	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word ."
B. Enter new principal office address,	if applicable:	3753 Park Avenue
Principal office address <u>MUST BE A S</u>		Miami, FL 33133
C. Enter new mailing address, if appl		3753 Park Avenue
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)	Miami, FL 33133
D. <u>If amending the registered agent a</u>	nd/or registered office ad	dress in Florida, enter the name of the
new registered agent and/or the ne	- · · · · · · · · · · · · · · · · · · ·	
Name of New Registered Agent	Thomas G. Sherman, P.A	A.
	90 Almeria Avenue	
	(Florida s	treet address)
New Registered Office Address:	Coral Gables	Florida 33134
New Registered Office Address.		(City) (Zip Code)
		,
New Registered Agent's Signature, if c		nt: with and accept the obligations of the position.
nereby accept the appointment as regist	егеа адені. Тат затіна	with and accept the congations of the position.
	\ <i>M</i>	
	Y Y	
	Signature of New	Registered Agent, if changing
Check if applicable	1/	
The amendment(s) is/are being filed p	ursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, an address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chie Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Francisco W Paredes	3753 Park Avenue
Add X Remove			Coral Gables, FL 33133
2) Change	PD	Leandro Paredes	3753 Park Avenue
X Add			Miami, FL 33133
Remove 3) Change	VD	Lazaro Paredes	3753 Park Avenue
X Add			Miami, FL 33133
Remove			
4) Change			
Add			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach addition	al sheets, if necessary).	les, enter change(s) here: (Be specific)	
	•		
 			
	<u> </u>		
		· · · · · · · · · · · · · · · · · · ·	
 			
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	<u> </u>		
			
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If an amendme	nt provides for an excha	nge, reclassification, or cancellation of	issued shares.
provisions for	implementing the amen	<u>Iment if not contained in the amendme</u>	<u>nt itself:</u>
(ij not appi	icable, indicate N/A)		
<u> </u>	<u> </u>		
	· ·- · · · · · · · · · · · · · · · · ·		

The date of each amendm date this document was sign		12-5-22	, if other than th
Effective date <u>if applicabl</u> e	e:		
		(no more than 90 days after amendment file d	ate)
Note: If the date inserted document's effective date o	in this block does no in the Department of	ot meet the applicable statutory filing requirem State's records.	nents, this date will not be listed as the
Adoption of Amendment(s) (<u>CH</u>	ECK ONE)	
The amendment(s) was/v action was not required.	were adopted by the i	incorporators, or board of directors without sha	reholder action and shareholder
■ The amendment(s) was/v by the shareholders was		shareholders. The number of votes cast for the approval.	amendment(s)
		shareholders through voting groups. The fallo group entitled to vote separately on the amenda	
"The number of vo	tes cast for the amen	dment(s) was/were sufficient for approval	
by		.,	
	(voti.	ng group)	
Dated		P	
Signature		,	
	(By a director, preside selected, by an incomposited fiduciary	dent or other officer – if directors or officers ha rporator – if in the hands of a receiver, trustee, by that fiduciary)	ve not been or other court
	Leandro Par	edes	
	(*)	Typed or printed name of person signing)	
	President		
	(Fitle of person signing)	