L2300053477

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COVER LETTER

TO: Registration Se Division of Cor	ection porations		-	· · · ·	•
JHLE WES	T LOOP MANAGEMENT, L	LC :			
	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	CHRISTOPHER A. DISC	HINO. ESQ.			
		Name of Person		- S	
	DISCHINO & SCHAMY PLLC			13 DEC	در در آ آ آ
		Firm/Company			
	4770 BISCAYNE BLVD. STE 600			SECRETARY OF EACH	
		Address		Line in	• -
	MIAMI, FLORIDA 33137			က် - ယ်၊ က - ယ်၊	3
		City/State and Zip Code			
	CHRISTOPHER@DSMIA	MLCOM			
	E-mail address: (to be used for future annual report notific	ation)		
For further information c	oncerning this matter, please ca	all:			
CHRISTOPHER A. DIS		786 581-2542 nt ()			
Name o	f Person	Area Code Daytime	Telephone Numbe	:r	
Enclosed is a check for th	ne following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifica Certified	iling Fee, ate of Status & d Copy d copy is enclosed)	

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JHLE WEST LOOP MANAGEMENT, LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our records.) ited Liability Company)	
The Articles of Organization for this Limited Liability Comp	pany were filed on DECEMBER 1, 2023	and assigned
Florida document number L23000534777		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and contain the words "Limited I	Liability Company," the designation "LLC" or th	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS	<u> </u>	
		2021 SE
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		200 - FT
		mm is til
		72 5
 If amending the registered agent and/or registered off igent and/or the new registered office address here: 	ice address on our records, enter the n	name of the new regist
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	Zin Coyle

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>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	JHLE MANAGEMENT, LLC	846 LINCOLN ROAD	□ Add
		FLOOR 3	□Remove
		MIAMI BEACH, FL 33139	■Change
			□Remove
			□ Change
			SECHETARY Remove
			
			□Remove
			Change
			□Add
			□Remove
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ective date, if other than the d	ate of filing:		(opt	ional)		
effective date is listed, the date must be: If the date inserted in this block	e specific and cannot be p	rior to date of filing or	more than 90 days after	er filing.) l	Pursuant t	o 605.020 e listed a
ument's effective date on the Dep	artment of State's recor	ds.	ing requirements, tr	is date ,		o motor a
cord specifies a delayed effective stilled.	late, but not an effectiv	e time, at 12:01 a.n	n. on the earlier of: (b) The	90th day	after the
December I	2023					
	2					