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COVER LETTER

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SUBJECT	SR 52 OP#	LLC			
	•	Name of Lin	nited Liability Company		
The enclos	sed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please retu	ım ail corr e spo	ondence concerning this matter	to the following:		
		Kenneth I. Morin			
			Name of Person		
		Morin Development LLC			
			Firm/Company		
		4923 W. Cypress St.			
			Address		· · · · · · · · · · · · · · · · · · ·
		Tampa, Florida 33607			
			City/State and Zip Code		
		ken@tampaglobal.com			
		E-mail address: (to be used for future annual	report notificat	tion)
For further	information c	oncerning this matter, please c	ail:		
Kenneth I.	Morin		nt (54036	
	Name o	l'Person	at ()Area Code	Daytime Te	lephone Number
Enclosed is	s 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 enci-		☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	lailing Addres		Street Ad		
	egistration Sivision of C	Section forporations		ition Section of Corpor	
	O. Box 632			tre of Talla	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

COVER LETTER

SUBJEC		11 LLC		
SUBJEC	~!; <u> </u>	Name of Lin	nited Liability Company	
The encl	Name of Limited Liability Company closed Articles of Amendment and fee(s) are submitted for filing. return all correspondence concerning this matter to the following: Kenneth I. Morin			
Please re	sturn all correspo	ondence concerning this matter	to the following:	
		Kenneth I. Morin		_
			Name of Person	
		Morin Development LLC		
			Firm/Company	
		4923 W. Cypress St.		
			Address	
		Tampa, Florida 33607		
			City/State and Zip Code	
		ken@tampaglobal.com		
		E-mail address: (to be used for future annual report no	tification)
For furth	er information c	concerning this matter, please c	all:	
Kenneth	I. Morin			
	Name o	i Persun		nie Telephone Number
Enclosed	is a check for t	he following amount:		
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1	Division of C	Corporations	Division of Co	rporations
]	P.O. Box 632	27	The Centre of	Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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SR 52 OP# 1 LLC		
(Name of the Limited Liab (A Flor	ility Company as it now appears on our records, ida Limited Liability Company)) TALLAHASSEE, FLORIO
The Articles of Organization for this Limited Liability Florida document number L25000058921	Company were filed on 2/12/2025	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
SR 52 OP NO 1 LLC		
The new name must be distinguishable and contain the words "L	imited Liability Company," the designation "LLC"	or the abbreviation "L.tC.
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registe agent and/or the new registered office address here	red office address on our records, <u>enter t</u> <u>e</u> :	he name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flo	orida
	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 Changing Registered Agent, Signature of New Registered Agent

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

4

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			Remove
			Change
			□Add
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Effective date, if other than the (If an effective date is listed, the date mused). If the date inserted in this bidocument's effective date on the D	s be specific and can ack does not meet	「竹き まののしょくまた	date of filing or a le statutory filis	ages then DO down	ptional) for filing.) Purs this date will n	uum to 605.0207 ot be listed as
ne record specifies a delayed effective ord is filed.	e date, but not an	effective tim	e, at 12:01 s.m.	on the earlier of	(b) The 90th	i day after the
February 14		025				
Dated	 7					
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Filing Fee: \$25.00