411000051539

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(Add	lress)	
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COVER LETTER

TO:	Registration Se Division of Cor			
CLID		KING DOWNTOWN, LLC		
SUB	JECT:		ited Liability Company	
The e	enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Pleas	se return all correspo	ndence concerning this matter	to the following:	
			Name of Person	
		THE ALHADEFF LAW (RUP, P.L	
			Firm/Company	
		11900 BISCAYNE BLVD	#289	
			Address	
		MIAMI, FL 33181		
			City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
		NATASHA@ALHADEFF	LAW.COM to be used for future annual report notif	ication)
For fi	urther information o	oncerning this matter, please c	·	
NAT	ASHA BARRIENT	OS@GMAIL.CM	786 618-9703	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclo	osed is a check for th	ne following amount:		
⊟ \$	525.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

M&M PARKING DOWNTOWN, LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our records ited Liability Company)	<u>)</u>
The Articles of Organization for this Limited Liability Comp Florida document number $\frac{L11000051539}{L11000051539}$.	pany were filed on 05/02/2011	and assigned
This 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 the abbrectation "L.B.C."
Enter new principal offices address, if applicable:		AH AN TO
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	SSEC. F
Enter new mailing address, if applicable:		H 1: 4]
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flo	orida 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	MAURICIO BEDOYA	25 SE 2 AVE. SUITE #250	= Add
		MIAMI, FL 33131	D
			Change
			Add
			Remove
			☐ Change
			□ Remove
		.	☐ Change
			☐ Remove
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ffecti	ve date, if other than the date of	filing:		(ontional)
an effe	ective date is listed, the date must be specif	ic and cannot be prior to da	te of filing or more than 90 d	ays after filing.) Pursuant to 605.020
	If the date inserted in this block does ent's effective date on the Departmen		statutory filing requireme	nts, this date will not be listed a
	,			
e rec	ord specifies a delayed effecti	ve date, but not an	effective time, at 1	2:01 a.m. on the earlier o
	90th day after the record is fi			
	ALICULAT 15	2017 —		
ated [AUGUST 15			
	111 ///			

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Filing Fee: \$25.00

Typed or printed name of signee