## L14000032896

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	,	
	`	\

Office Use Only



100269708131

100269708131 02/23/15--01040--001 \*\*25.00

2015 FEB 23 PM 3:

MAR 0 5 2015

J. MARRIS

## TO ARTICLES OF ORGANIZATION OF

## RUN ESTATES LLC

(Name of the	Limited	Liability	Company	as it now	appears	on our	records.)
	/ A	Florido I	imited Lie	hility Core	monsy)		

The Articles of Organization for this Limited Liability Compar	ny were filed on	02/26/2014	and assigned
Florida document number			<del></del>
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	ıbility compan	y here:	
The new name must be distinguishable and end with the words "Limited Li	ability Company,"	'the designation "LLC" or t	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
			2015 F
Enter new mailing address, if applicable:			EB 2
(Mailing address MAY BE A POST OFFICE BOX)			$\frac{\langle \mathcal{E} \rangle_{\mathcal{L}}^{\mathcal{L}}}{\langle \mathcal{E} \rangle_{\mathcal{L}}^{\mathcal{L}}} \omega$
			E P
		_	3: 2 ORIG
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he		s on our records, <u>en</u> t	emithe name of the nev
Name of New Registered Agent:			
New Registered Office Address:			
	Enter	Florida street address	
· · · · · · · · · · · · · · · · · · ·		, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agen	<u>t:</u>		
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and comple	•		

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

## Authorized Member being added or removed from our records:

MGR = Manager AMBR'= Authorized Member **Type of Action** <u>Title</u> <u>Name</u> <u>Address</u> MGR VIRAMOUTOU, ALEXANE 612 15TH STREET MIAMI BEACH, FL 3 □ Add ■ Remove ☐ Remove □ Add ☐ Remove □ Add \_□ Remove ☐ Add ☐ Remove

•	
•	•
	tive date, if other than the date of filing: (optional)
	ective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after this document is filed by the Florida Department of State)
the da	02/09/2015
Dated	
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00

SECRETARY OF STATE