L15000107041

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		,





000280063100

01/15/16--01005--010 **25.00

SECKETARY OF STATE ALLIAHASSEE, FLORIDA

JAN'I'9 2013 SHIND

COVER LETTER

TO: Registration Sec Division of Corp		·	₩	
SUBJECT:	33 MIDTOU Name of Limited	DN LLC d Liability Company		
The enclosed Articles of A	mendment and fee(s) are submit	tted for filing.		
Please return all correspon	dence concerning this matter to	the following:		
	<u> Yanina</u>	Manutalu E	£	
	Yanına Mic	Cultary PA		
	20801 BISC	AYNE BUD	#306	
	<u>Aventu</u>	Ma Fl 331 City/State and Zip Code	80	
	E-mail address: (to l	e mcuut314 be üsed for future annual repo	rt notification)	
For further information co	ncerning this matter, please call:	;		
Van vol Name of	<u>úcultalú, ESP,</u> Person	at (305)	So 106) Paytime Telephone Number	2016 JAN
Enclosed is a check for the	e following amount:		ណ៍ ស	
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	i) Certified : C	g Fee, of Status &

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

TO ARTICLES OF ORGANIZATION OF

33 MIDTOWN	LUC
(Name of the Limited Liability Compar (A Florida Limited L	<u>ity as it now appears on our records.)</u> Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>LISOOOO16764.1</u>	were filed on bold 2015 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	pility company here:
The new name must be distinguishable and contain the words "Limited Liabil	ility Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	DE LAN AN A
	HASSEEL T
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent: New Registered Office Address:	
	Classica.
	, Florida
New Registered Agent's Signature, if changing Registered Agent:	<u>:</u>
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as publications of the registered office company has been notified in writing of this change.	ree to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR_	Cababie Doniel, Flias	19950 W. LOUNKY Club dr	🖸 Add
		#900, AUPITURGIF1 33180	Remove
			Change
MGR	Cababil Dornel Ablaham	19950 W. Country dub a	Ádd
		#900, Aventura, F1 37161	☐ Remove
			Change
		 	
			Remove
			□ Change
		AECAE MAHAH	Add
		HASSEE FLORID	Remove Control Change
		LORIDA	D Add
			Remove
			Change
			Add
			Remove
			☐ Change

•	•				
_					
_					
_					
-					
_					
_					
_					
_					
-					
_	— वर्ष ()		~		
-			2016	****	
	PA H	t	JAN	W/SHIFTED	
_	လ လ က	3 X X	51		
_	Tr.	<u> </u>	U		
_		رار. است	<u>- ý</u> -	U	
	RIO A	÷	<u> </u>		
E. Effecti	ive date, if other than the date of filing: (option	nal)		
Note:	ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after. If the date inserted in this block does not meet the applicable statutory filing requirements, this sent's effective date on the Department of State's records.	filing date	g.) Pursu e will no	ant to 605. ot be liste	.0207 (3)(b) ed as the
	cord specifies a delayed effective date, but not an effective time, at 12:01 a 90th day after the record is filed.	.m.	on th	ie earlie	er of:
Dated	1/6/16				
	Signature of a member or authorized representative of a member				
	Moining allitari 600				
	YOINING Wice UT 24 ESQ.				

Page 3 of 3

Filing Fee: \$25.00