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COVER LETTER,

TO: Registration pivision of	n Section Corporations		
SUBJECT: 10	00 WEST AVE	F 723, LLC ited Liability Company	
The enclosed Articles	s of Amendment and fee(s) are sub-	mitted for filing.	
Please return all com	espondence concerning this matter	to the following:	
	Abraham	Morris Name of Person	
		Firm/Company	<u> </u>
	1200 Wes	+ Ave wit 1010	2
	Mani Bea	Sich FL 33/3 City/State and Zip Code	9
	Closes 77- E-mail address: (FOCOLCOM to be used for future annual report notifi	
For further information	on concerning this matter, please ca	dil:	
Steve Name	Marris me of Person	at (5/6) 554 Area Code Daytime	-2684 Telephone Number
Enclosed is a check f	or the following amount:		
\$25.00 Filing Fee	e \$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

1000 WEST AVE T (Name of the Limited Liability Co. (A Florida Limited)	ompany as if now appears on our records.) ited Liability Company)
The Articles of Organization for this Limited Liability Comp Florida document number	pany were filed on <u>January</u> , 27,2016 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited ZOO WEST AVE 1109 The new name must be distinguishable and contain the words "Limited"	Liability company here: LLC C Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRES.)	600 Three Fslands Bluden + 140
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1200 West Ave, unit 1010 Miani Beach, FL 33139
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	ed office address on our records, enter the name of the new
Name of New Registered Agent:	<u> </u>
New Registered Office Address:	Enter Florida street address
	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 = M AMBR = A	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			Add
			Remove
			☐ Change
			C Add
			☐ Remove
			Change
			☐ Remove
			://□ Change
			Remove
			☐ Change
			□ Remove
			Change
			Add
			□ Remove
			□ Change

D. If amending any other information, enter change(s) here: (Attach addit	tional sheets, if necessary.)	
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	906	_ *1**
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E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	more than 90 days after filing.) Pursuant to 60	
If the record specifies a delayed effective date, but not an effective (b) The 90th day after the record is filed.	time, at 12:01 a.m. on the earl	ier of:
Dated March 2 2016.		
Signature of a member or authorized representative	ve of a member	
Abraham Morris		

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Filing Fee: \$25.00