16000194012

(ке	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(60	oness Entry Ival	no,
(D.		
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



600291534956

11/10/16--01004--030 **25.00

FILED PH 2: 21

16 NOV 10 PH 2: 21

SECRETARY OF STATE
SECRETARY SEEF, FLORIDA

D. SCOTT NOV 1 4 2016

COVER LETTER

Section Corporations	
LC	
Name of Limited Liability Company	
of Amendment and fee(s) are submitted for filing. spondence concerning this matter to the following:	
John Strzalka	
Name of Person	
ANTC LLC	
Firm/Company	
1830 SW 23rd Terrace	
Address	
Fort Lauderdale, FL 33312	
City/State and Zip Code	SEC ALL
	置るコ
n concerning this matter, please call:	FILED NOV 10 PM REFARY OF S AHASSEE, FL
954 654-0632	FLO FLO
e of Person Area Code Daytime Telephone Number	24 ATE ADA
or the following amount:	
(additional copy is enclosed) Certified C	of Status &
	Name of Limited Liability Company of Amendment and fee(s) are submitted for filing. spondence concerning this matter to the following: John Strzalka Name of Person ANTC LLC Firm/Company 1830 SW 23rd Terrace Address Fort Lauderdale, FL 33312 City/State and Zip Code john.strzalka@gmail.com E-mail address: (to be used for future annual report notification) n concerning this matter, please call: at (954) 654-0632 at (954) Daytime Telephone Number or the following amount: "The following amou

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

ANTC LLC					
(Name of the Limited Liability (A Florida Li	Company as it now appears on our records.) mited Liability Company)				
The Articles of Organization for this Limited Liability Conforda document number L16000194012	npany were filed on 10/20/2016	and assigned			
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited	d liability company here:				
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRES	<u>(SS)</u>				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		SECRETARY SECRETARY TALLAHASS			
B. If amending the registered agent and/or register registered agent and/or the new registered office address		enter the name of the ne			
Name of New Registered Agent:		3>			
New Registered Office Address:	Enter Florida street address				
	, Flor	ida			
	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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Lubkin, Adam R.	3332 NE 190TH STREET	Add
		Suite 2712	■ Remove
		Aventura, FL 33180	☐ Change
MGR	Ibis Development Group, LLC	3332 NE 190th Street	■ Add
		Suite 2712	Remove
		Aventura, FL 33180	□ Change
			Add
			□ Remove
			☐ Change
			
			☐ Remove
			SECRETALIA
			SS TO AGE
			PE OF SERVICE PROPOVE Remove 2
			□ Change
			Add
			□ Remove
			☐ Change

			· · · · · · · · · · · · · · · · · · ·
		<u></u>	
······································		·	
			
	White the second		
			SE SE
			AHAS
	10/00/01/		
ective date, if other than the d	ate of filing: 10/20/2016	1. (7)	(ontional) · 🚟 🗝 🤫
nefrective date is listed, the date must be tee: If the date inserted in this bloc	k does not meet the applicab	le statutory filing requirement	nts, this date wil l hot be listed :
cument's effective date on the Dep	artment of State's records.		24 IDA
record specifies a delayed of the 90th day after the record		an effective time, at 12	2:01 a.m. on the earlier
The John day after the recor	a is mea.		
November 7	2016		
11		- '	
John Xtr	M		
	for atura of a mamber or suthor	zed representative of a member	

Page 3 of 3

Filing Fee: \$25.00