

Jan. 30. 2017 1:04 PM
1/30/2017

L17 0000007786

No. 0196 P. 1/4

Division of Corporations

Florida Department of State
Division of Corporations
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
720 SOUTH SHORE, LLC

Certificate of Status	0
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Page Count	03
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2017 JAN 30 A 10:07
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TALLAHASSEE, FLORIDA

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S Warren
JAN 31 2017

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

720 SOUTH SHORE, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on January 10, 2017 and assigned Florida document number L17000007786.

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 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 ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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TALLAHASSEE, FLORIDA

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City

Florida

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

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MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	NICOLE HALIMI	24 AVENUE GRAVIER	<input checked="" type="checkbox"/> Add
		NICE, FR 06100 FR	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	JEAN C HALIMI	24 AVENUE GRAVIER	<input type="checkbox"/> Add
		NICE, FR 06100 FR	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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No. 0196 P. 4/4

[illegible]

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 27 January, 2017

~~NICOLE HALIMI~~

Typed or printed name of signer

Filing Fee: \$25.00

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TREASURER
FLORIDA

AD:07

THE
L
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D