## 117000089449

(Re	equestor's Name)				
(Ac	ddress)				
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(Ci	ty/State/Zip/Phone	e #)			
(Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:					
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## **COVER LETTER**

	427 Anasta	sia Ave LLC		
SUBJECT:			nited Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return	all correspo	ondence concerning this matter	to the following:	
		Sean Moynahan		
			Name of Person	
		<b>Bowery Properties</b>		
			Firm/Company	······
		335 NE 59th Ter		
			Address	
		Miami, FL 33137		
		-	City/State and Zip Code	
		smoynahan@boweryproper		<u> </u>
		E-mail address: (	to be used for future annual report noti	fication)
for further in	nformation c	oncerning this matter, please c	all:	
Sean Moyna	han		305 4989901	
	Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a	check for th	ne following amount:		
■ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate 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

427 Anastasia Ave LLC			
( <u>Name of the Limited Li</u> (A F	ability Company as it now appears on o orida Limited Liability Company)	ur records.)	_
The Articles of Organization for this Limited Liabili Florida document number L17000089449			assigned
This amendment is submitted to amend the followin	g:		
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 designa	tion "LLC" or the abbreviation	ı"L.L.C."
Enter new principal offices address, if applicable	<u></u>		
Principal office address MUST BE A STREET Al	DDRESS)	·-	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX  B. If amending the registered agent and/or registered agent and/or the new registered office	egistered office address on our	[A1]	ne of the nev
registered agent and/or the new registered office	address nere:	F S	$\mathbf{D}$
Name of New Registered Agent:		STAIL LORIDA	
New Registered Office Address:		·	
	Enter Florida str	eet address	
		, Florida	
	City	Zip Ca	ode

## 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	Thomas Neary	335 NE 59th Terr, Miami FL 33137	<b>=</b> Add
			Remove
			Change
MGR	PETER NEARY	335 NE S9+ Terr mic	33137 am; Fl = Add
			☐ Remove
			Change
			Add
			□ Remove
			Change
			17Add
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an effective date is listed, the date must be ote: If the date inserted in this block ocument's effective date on the Department.	specific and car does not mee	nnot be prior to t the applical	o date of filing	or more than 90 filing requiren	days after fi nents, this c	ing:):Pu late will	nuent to I not be	o 605.02 e listed
e record specifies a delayed ef The 90th day after the record		e, but not	an effecti	ve time, at	12:01 a.	m. on	the e	arlier
May 24th		2017						
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Filing Fee: \$25.00