

L17000132065

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

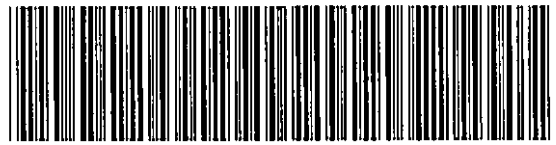
(Document Number)

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18 JUN 18 PM 12:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C SIMMONS
JUN 21 2018



*Reply
Thank you*

FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 7, 2018

ALIANE DARMOUNI
44 W FLAGLER ST
MIAMI, FL 33130

SUBJECT: 5841 NE 18TH AVE LLC
Ref. Number: L17000132065

We have received your document for 5841 NE 18TH AVE LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons
Regulatory Specialist III

Letter Number: 518A00011919



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2018 JUN 18 AM 11:33

DEPARTMENT OF
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 5841 NE 18TH AVE LLC _____
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Aline Darmouni _____
Name of Person

EXCO US ATRIUM _____
Firm/Company

44 W FLAGLER ST _____
Address

MIAMI FL-33130 _____
City/State and Zip Code

office@excous.com _____
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Aline Darmouni _____ 305 600 4405 _____
Name of Person at () Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$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**

5841 NE 18TH AVE 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 06/16/2017 and assigned Florida document number L17000132065.

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: EXCO US ATRIUM

New Registered Office Address: 44 W FLAGLER ST - SUITE 2300
Enter Florida street address

MIAMI Florida 33130
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>	<u>Address</u>	<u>Type of Action</u>
MGM	SOGEFI2 HOLDING LLC	1201 N ORANGE ST, SUITE 600	<input checked="" type="checkbox"/> Add
		WILMINGTON, DE 19801	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGM	SOGEFI2 HOLDINGS LLC	1201 N ORANGE ST, SUITE 600	<input type="checkbox"/> Add
		WILMINGTON, DE 19801	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Multiple horizontal lines for amending information.

FILED JUN 18 PM 12:37 SECRETARY OF STATE WILLIAMS, SHELBY L. FLORIDA

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 6/1/2018

Signature of a member or authorized representative of a member

Aline Darmow Typed or printed name of signee