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то:		
10.	Division of Corporations Fax Number ; (850)617-6383	45 G
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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 1850 NE164 OPERATIONS LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1850 NE164 Operations LLC		<u></u>	
(Name of the Limited Limbility Com (A Florida Limited	nany as it now annears on our records.) d Liability Company)		
The Articles of Organization for this Limited Liability Companion of the Limited Liability Companion of the Liability Companion o	ny were filed on 6/15/2018	_ and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	ability company here:		
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or the abbre	viation "L.L.C."	_
Enter new principal offices address, if applicable:			_
(Principal office address MUST BE A STREET ADDRESS)		> 20 E	<del>_</del>
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Enter new mailing address, if applicable:		> · · ·	<del>-</del> -
(Mailing address MAX BE A POST OFFICE BOX)		<del>2</del> <del>2</del> <del>2</del> 2	
B. If amending the registered agent and/or registered		ie name of the	e ne
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h	ere:		
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		—
	, Florida		
<del></del> -	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>	Name	Address	Type of Action
AMBR	Yitzchok Meir Spalter	2233 NOSTRAND AVE, 3RD FL	
		Brooklyn, NY 11210	□ Remove
			Change
			D Add
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		_	D Add
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er is a data if other than the s	inter of filing:	(optional)
an effective date is listed, the date must	jate of filing:  be specific and cannot be prior to date of filing or more than sek does not meet the applicable statutory filing require	90 days after filing.) Pursuant to 605.0207 ements, this date will not be listed as
ote: If the date inserted in this plo- cument's effective date on the De		
record specifies a delayed	effective date, but not an effective time, a	t 12:01 a.m. on the earlier o
The 90th day after the reco	ig is fried.	201
June 27th	2018	
ated		를 하는 <u>중국</u> 
		- 170 mg -
	Jeganote (	<del></del>
	Signature of a member or authorized representative of a mer	nber Co
Taylor Lolya		<del></del>

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