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COVER LETTER

Division of Corporations 8901 STRITTER LLC SUBJECT: __ 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: MAXIMILIAN DEITERMANN Name of Person LEEDS REAL ESTATE MANAGEMENT LLC Firm/Company 610 E 45 ST Address HIALEAH, FLORIDA, 30309 City/State and Zip Code CORP@DEITERMANN.US E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: YANERY DEITERMANN 305 4588346 Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: □ \$30.00 Filing Fee & ■ \$25.00 Filing Fee □ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed)

Mailing Address:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

8901 STRITTER LLC

20 MAR - 9 PM 1:-(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 1.19000260771 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: MDRE 1898 LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 610 E 45TH ST 30309 HIALEAH FLORIDA Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 610 E 45TH ST 30309 HIALEAH FLORIDA Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: LEEDS REAL ESTATE MANAGEMENT. LLC Name of New Registered Agent: 610 E 45TH ST New Registered Office Address: Enter Florida street address HIALEAH Florida

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.

City

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	MAXIMILIAN DEITERMANN	11900 GRHFING BLVD 33161 Biscayne Park FL	□Add
			≡ Remove
	LUTTE BULL INDICTOR ALL CITATION		□Change
MGR	LIGEDS REAL ESTATE MANAGEMENT LLC	610 E 45TH ST 30309 HIALEAH FLORIDA	= Add
		·	Петюve
			□Change
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		02/26/2020			
fective date, if other th	an the date of fil	ing:		(optional)	
an effective date is listed, the ote: If the date inserted in secument's effective date o	this block does no	t meet the applicable	tte of filing or more than statutory filing requir	90 days after filing.) Pursuant to ements, this date will not be	o 605,0207 (. : listed as tl
record specifies a delayed is filed.	effective date, but r	not an effective time,	at 12:01 a.m. on the e	arlier of: (b) The 90th day	after the
02/26		2020			
ated					

Typed or printed name of signee

Maximilian Deitermann