

L12000067341

08/26/16 12:29PM EDT Right Way Multi-Services Corp ->
6383 Pg 1/4

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Division of Corporations

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : TAX, ACCOUNTING AND FINANCIAL EXPERTS, INC.
Account Number : 120120000058
Phone : (305) 438-7671
Fax Number : (866) 895-8710

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: cpuk276@201.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
JEBEL LAS VEGAS HOLDINGS, LLC

Certificate of Status	0
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Page Count	03
Estimated Charge	\$25.00

2016 AUG 26 PM 12:32

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2016 AUG 26 AM 11:58
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Help AUG 29 2016

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

JEBEL LAS VEGAS HOLDINGS, 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 05/18/2012 and assigned
Florida document number L12000067341.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

CORAL RITZ RESIDENCES LLC

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)

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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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>
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Change
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Change
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Change
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_____	_____	_____	☐ Remove
_____	_____	_____	☐ Change

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Dated August 25th 2018

Signature of a member or authorized representative of a member

JORGE E JIMENEZ BUITRAGO

Typed or printed name of signer

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