# L15000059208

(Re	questor's Name)	· · · · · · · · · · · · · · · · · · ·
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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#### **COVER LETTER**

TO:		tion Section of Corpor		,	·	
SUBJE		atee Inves	tment Properties Holdings, I	LLC		
SUBJE	.c.i		Name of Limi	ted Liability Company		
The end	closed Arti	cles of An	nendment and fee(s) are subr	nitted for filing.		
Please	return all c	orrespond	ence concerning this matter t	to the following:		
			Rahul P. Ranadive			
				Name of Person		_
			Carlton Fields			
				Firm/Company		<del></del>
			100 SE 2nd Street, Suite 42	000		
				Address		<del>-</del>
			Miami, FL 33131			
				City/State and Zip Code		_
			rranadive@carltonfields.con			
			E-mail address: (t	o be used for future annual r	eport notification)	
For fur	ther inform	ation con	cerning this matter, please ca	11:		
Rahul !	P. Ranadiv	e		305 539	-7237	
		Name of P	erson	Area Code	Daytime Telephone Number	er
Enclose	ed is a chec	k for the	following amount:			
<b>=</b> \$25	5.00 Filing	Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is encl	Certific osed) Certifie	ate of Status &

**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

Manatee Investment Properties Holdin	•	<u> </u>
(Name of the Limited (A	Liability Company as it now appears on our records Florida Limited Liability Company)	ن
The Articles of Organization for this Limited Liab	ility Company were filed on April 03, 2015	and assigned
Florida document number L15000059208	<del></del> ·	
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of th	ne limited liability company here:	
The new name must be distinguishable and contain the word	s "Limited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:	
(Principal office address MUST BE A STREET)	ADDRESS)	
		00 14
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	
		<u> </u>
		<b>5</b>
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records ee address here:	, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
-	Enter Florida street address	,
	, Flo	orida
	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	<u>Address</u>	Type of Action
Mgr	NCG Management LLC	232 Andalusia Avenue, Suite 202	Add
		Coral Gables, FL 33134	■ Remove
			☐ Change
Mgr	Fabrizio Wittenburg	232 Andalusia Avenue, Suite 202	
		Coral Gables, FL 33134	_ □ Remove
			Change
			□ Add
			☐ Remove
			Change
<del></del>			🗅 Add
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			☐ Remove
			☐ Change

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Filing Fee: \$25.00