L17000010579

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SECRETARY OF STATE
ALL AHASSEE, FLORIDA

K. SALY JAN 3 0 2017

COVER LETTER

TO:	Registration S Division of Co			
eunir	HUMEDE			
SUBJE.	CT:		ited Liability Company	
The end	closed Articles o	f Amendment and fee(s) are sub-	mitted for filing.	
Please i	return all corresp	ondence concerning this matter	to the following:	
		ANIA INZAURRALDE		
			Name of Person	
			Firm/Company	
		2001 HOLLYWOOD BLV	D STE 303	
		, , , , , , , , , , , , , , , , , , , ,	Address	
		HOLLYWOOD, FL 33020		
		. , , , , , , , , , , , , , , , , , , ,	City/State and Zip Code	
		kd@dmg-properties.com		
		E-mail address: (t	o be used for future annual report noti	fication)
For furt	her information	concerning this matter, please ca	all:	
ANIA I	NZAURRALDI		954 589-5110 at ()	
	Name	of Person	Area Code Daytime	e Telephone Number
Enclose	d 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

ZOIT JAN 27 PM 12 34

TALLAHASSEE, FLORIDA

HUMEDES 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 01/12/2017	and assigned
Florida document number L17000010579		
This amendment is submitted to amend the following:		
mending name, enter the new name of the limited liability company here: RES LLC name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" new principal offices address, if applicable: ipul office address MUST BE A STREET ADDRESS) new mailing address, if applicable: new mailing address, if applicable: ng address MAY BE A POST OFFICE BOX) amending the registered agent and/or registered office address on our records, enter the name of the new		
IUMERES LLC		
he new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A	
Principal office address MUST BE A STREET ADDRESS)		
	N/A	
		<u></u>
Mailing address MAY BE A POST OFFICE BOX)		
		· ************************************
3. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addres	78
	FI	nrida
	Cny	orida Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>.</u>	
hereby accept the appointment as registered agent and agrowsions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, an provided for in Chapter 605,	nd I am familiar with and F.S. Or, if this document is

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: 2017 JAN 27 PM 1 34 MGR = Manager AMBR = Authorized Member CALLAHASSEE. FLORIDA Address **Type of Action** <u>Title</u> <u>Name</u> N/A □ Remove ☐ Change □ Add _□ Remove ☐ Change □ Add ☐ Remove _□ Change □ Add _□ Remove _ Change _□ Add ☐ Remove _□ Change □ Add □ Remove

☐ Change

<u> </u>	FILE	
/	tion, enter change(s) here: (Attach additional sheets, if necessary.) 2017 JAN 27 PM FALLAHARY OLD	1
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ective date, if other than the	date of filing:(optional)	
effective date is fisted, the date mus	it be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 6	505 02
<u>e:</u> If the date inserted in this bit ument's effective date on the Do	ock does not meet the applicable statutory filing requirements, this date will not be li epartment of State's records.	isted a
record specifies a delayed	i effective date, but not an effective time, at 12:01 a.m. on the earl	lier c
he 90th day after the reco		
January 23	2017	
	Ania Inzayrralder	
	Signature of a member or authorized representative of a member	
	•	

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Filing Fee: \$25.00