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то:	Registration Se Division of Con			٠ -			
CLID IE:	1760 NE, I	LLC					
SUDJE	UI:	Name of Lim	nted Liability Company	 			
The enc	losed Articles of	Amendment and fec(s) are sub	mitted for filing.				
Please r	eturn all correspo	ondence concerning this matter	to the following:				
		Carlos Perez					
			Name of Person		ling Fee, tte of Status & Copy		
		1760 NE, LLC					
		Firm/Company					
		1760 NE 145 ST					
		Address					
Miami, FL 33181							
			City/State and Zip Code				
Miami, FL 33181				.			
				fication)	<u></u>		
For furth	ner information c	concerning this matter, please ca	all:		_		
Cindy P	erez	404	305 468-9093 at ()		7		
	Name o	t Person	Area Code Daytim	e Telephone Number	, .5		
Enclose	d is a check for the	he 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 enck			
	MAIL	ING ADDRESS:	STREET/COURI	ER ADDRESS:			

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

TO ARTICLES OF ORGANIZATION OF

1760 NE, LLC			
(<u>Name of the Lim</u>	ited Liability Compan (A Florida Limited Li	v as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited I Florida document number <u>L18000157405</u>	_iability Company v	were filed on <u>06/27/2018</u>	and assign
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liabil	ity company here:	
The new name must be distinguishable and contain the Enter new principal offices address, if appli		y Company," the designation "LLC" or the	abbreviation "L.L.C.
			-
(Principal office address MUST BE A STRE	<u>et Addkess)</u>		To 50
			1V[510H GF 7]
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	EBON)		10: 10:
			7.79
B. If amending the registered agent and registered agent and/or the new registered of	.,		er the name of
Name of New Registered Agent:	Robert C Domin	quez. Esq	
New Registered Office Address:	5881 NW 151 ST		
		Enter Florida street address	

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 we provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document 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

Miami Lakes

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u> .	Address	Type of Ac
1400	Cindy Perez	1760 NE 145 ST Miami , FL	
MGR		33181	■ Add
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Affective date, if other that fan effective date is listed, the da	1 the date of tiling: te must be specific and cann	ot be prior to date	of tiling or more th	(optional) an 90 days after tiling	.) Pursuant to 605.
Note: If the date inserted in t					
locument's effective date on					
e record specifies a del	aved effective date.	but not an e	effective time	. at 12:01 a.m.	on the earlie
The 90th day after the	record is filed.			,	
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Pated June 27	20	19			
pated	· —	·			
/ //	N				
	Si santa di manda				
	Signature of a memb	er or aumorized r	epresentative of a r	петрег	
Carlos Perez	y				
Carros rerez	<u> </u>				
	Lynd	d or printed name	e of signee		

Page 3 of 3

Filing Fee: \$25.00