L0000014649

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

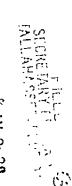
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COVER LETTER

TO: Registration Division of C	n Section Corporations
Friefeld SUBJECT:	Properties, LLC
30B0EC1.	Name of Limited Liability Company
The enclosed Articles	of Amendment and fee(s) are submitted for filing.
Please return all corre	spondence concerning this matter to the following:
	Ivana Saud
	Name of Person
	JONATHAN H. GREEN & ASSOCIATES, P.A.
	Firm/Company
	800 Brickell Avenue, Suite 1400
	Address
	Miami, Florida 33131
	City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For further information	n concerning this matter, please call:
Ivana Saud	305 372-5100 at ()
Nam	at () ne of Person Area Code Daytime Telephone Number
Enclosed is a check fo	or the following amount:
\$25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status Certified Copy (additional copy is enclosed) 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 Clitton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Friefeld Properties, LLC		
(<u>Name of the Limited Liability C</u> (A Florida Lii	Company as it now appears on our records.) mited Liability Company)	-
The Articles of Organization for this Limited Liability Com	ipany were filed on 11/28/2000	and assigned
Florida document number L00000014649	· · · · · · · · · · · · · · · · · · ·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
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:	-	_i
(Principal office address MUST BE A STREET ADDRES	<u></u>	17 TE
		日主
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		?
		<u> </u>
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	ed office address on our records, <u>ente</u> <u>s here</u> :	r the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida _	
	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>	<u>Name</u>	Address	Type of Action
MGR	Friefeld, Richard MD	16601 NE 19th Ave	
		North Miami Beach, FL 33162	■ Remove
			Change
MGR	S.S.E. Family LLLP	16601 NE 19th Avenue	⊟ Add
		North Miami Beach, Florida 33162	□ Remove
			Change
			Remove
			□ Change
····			
			Remove
			Change
			Add
		-	Remove
			Change
			Add
			□ Remove
			Change

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ective date, if other than the da	ite of filing:		(0	ptional)
n effective date is listed, the date must be te: If the date inserted in this block	c does not meet the appi	licable statutory	or more than 90 days a filing requirements,	after filing.) Pursuant to 60 this date will not be lis
rument's effective date on the Depa	irtment of State's record	is.		
second specifies a data.	65 aki - J			
record specifies a delayed e he 90th day after the record	fiective date, but r d is filed.	iot an effecti	/e time, at 12:0)1 a.m. on the earli
December 14 ed	2017	/	20	
	·	<u> </u>		
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00