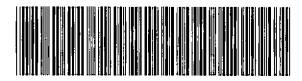
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## **COVER LETTER**

10:	Registration Sec Division of Cor			
SHRI	Weitzer Cor	mmunities, LLC		
SUDA		Name of Lim	ited Liability Company	
The e	nclosed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please	e return all correspo	ndence concerning this matter	to the following:	
		Harry Weitzer		
		<del></del>	Name of Person	
			Firm/Company	<del></del>
		3725 NE 214th Street		
			Address	
		Aventura, Florida 33180		
			City/State and Zip Code	<del></del>
		Truetzer (	@ me-Com to be used for future annual report no	<del></del>
		E-mail address: (	to be used for future annual report no	tification)
For fu	irther information co	oncerning this matter, please ca	all:	
75	we?	+2e ?2	at ( 3C5 ) 6 C8 -	<i>ja41</i>
	Name of	l Person	Area Code Daytii	me Telephone Number
Enclo	sed is a check for th	e following amount:		
<b>■</b> \$:	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

FILED

2021 OCT 12 AM 9: 08

		SECRETION OF AT TH
ted Liability Compa (A Florida Limited)	iny as it now appears Liability Company)	ON OUR RESIDENCE OF STREET OF STREET
iability Company	were filed on $\frac{06/2}{}$	9/2001 and assigned
lowing:		
of the limited liab	ility company her	<u>e</u> :
words "Limited Liabi	lity Company," the des	ignation "LLC" or the abbreviation "L.L.C."
cable:		
ET ADDRESS)	3725 NE 214th Street	
Enter new mailing address, if applicable:		33180
(BOX)	3725 NE 214th S	treet
(Mailing address MAY BE A POST OFFICE BOX)		33180
		our records, enter the name of the
3725 NE 214th		
	Enter Floria	la street address
Aventura		Florida 33180
	City	Zip Code
Registered Agent:	. /	
ed agent and agr	ee to act in this co	
	lowing:  of the limited liab  words "Limited Liabi  cable: ET ADDRESS)  // Or registered or office address her  Harry Weitzer  3725 NE 214th  Aventura  Registered Agent: ed agent and agr	lowing:  of the limited liability company here words "Limited Liability Company," the des cable:  ET ADDRESS)  Aventura, Florida  Harry Weitzer  3725 NE 214th St  Aventura, Florida  Vor registered office address on office address here:  Harry Weitzer  3725 NE 214th Street  Enter Florida

If Changing Registered Agent, Signature of New Registered Agent

accept the obligations of my position as registered agent as proyided 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 flubility

company has been notified in writing of this change.

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>	Type of Action
MGR	Leanne Goh DeCoste	1535 W Harmony Lk Cr	
		Davie, Florida 33324	
			■ Remove
			☐ Change
			☐ Remove
			☐ Change
			Remove
			□ Change
			□ Remove
			Change
			□ Remove
			Change
			Remove
			Change

-	
<u> </u>	
an effect <u>lote:</u> If	e date, if other than the date of filing:
e reco The 9	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the day after the record is filed.
	10/02/2020/
ated	
ated	
ated	Signature of a member or authorized representative of a member
rated	

Page 3 of 3

Filing Fee: \$25.00