

Division of Corporations

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To:

Division of Corporations ..

Fax Number : (850)617~6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 : (561)694-8107 : (561)694-1639 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Addross:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PEBB ENTERPRISES, LLC

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OCT 27 2017

Electronic Filing Menu

Corporate Filing Menu

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		bb Enterprises, LLC		
(	Name of the Limited Liabil (A Plorid	lity Company as it now appea da Limited Liability Company)	rs ол our records.)	
The Articles of Organization fo	r this Limited Liability (	Company were filed on 07	7/24/2003	and assigned
Florida document number L030	000027303			
This amendment is submitted to	amend the following:			
A. If amending name, enter t	he new name of the lin	nited liability company h	<u>ere</u> :	
Continental Miami Beach Holdin	gs. LLC			
The new name must be distinguishable	c and contain the words "Lis	mited Liability Company," the	designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices ac	ldress, if applicable:	47.		
(Principal office address MUS	T BE A STREET ADD	RESS)		
Enter vew mailing address, if	applicable:			70
(Mailing address MAY BE A POST OFFICE BOX)			- 6 <sup>m</sup> 3	
			. No 	
B. If amending the registe			o our records, <u>e</u>	nter the name of the new
registered agent and/or the no	ew registered office add	<u>dress here</u> :		11.
Name of New Registe	red Agent:	##·1		
New Registered Office	e Address:			
		Enter Flo	orida 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

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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
<del></del>			□ Add
			□ Remove
			☐ Change
			D Add
			Remove
		\$25. 29	
			Add
			□ Remove
			Change
<del></del>			A <b>&amp;</b> ₽
			Rcmove
			Change
			□ Add
			☐ Remove
			□ Change
			D Add
			Remove
		₹•	Change

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Signature of a member or authorized representative of a member

Todd Rosenberg Typed or printed name of signee

Filing Fee: \$25.00