Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

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From:

Account Name

: BLACKLEDGER ENTITY MANAGEMENT LLC

Phone

Account Number : I20150000089 : (305)444-8800

Fax Number

: (305)444-4010

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∢LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 806 HIDDEN BAY LLC

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Electronic Filing Menu

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Help

305

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

806 Hidden Bay LLC		
(Name of the Limited Lin (A Flo	bility Company as it now appears on our records.) orda Limited Liability Company)	
The Articles of Organization for this Limited Liabilit Florida document number L04000038443	y Company were filed on <u>5/20/2004</u>	and assigned
This amendment is submitted to amend the following	Ţ.	
A. If amending name, enter the new name of the	limited 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:		
(Principal office address MUST BE A STREET AL	ODRESS)	
		<u> </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX		SSH - 6
B. If amending the registered agent and/or re	egistered office address on our records, e	nter the mame of the new
registered agent and/or the new registered office		B 100
Name of New Registered Agent:	<u> </u>	
New Registered Office Address:	Enter Florida street address	
	. Florid	in .
	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

305

Title	itle Name Address		Type of Action			
MGR	MARIBEL PORRAS	3370 NE 190 STREET UNIT 806	☐ Add			
		AVENTURA, FL 33180	■ Remove			
			☐ Change			
P	MARIBEL PORRAS GIL	3370 NE 190 STREET UNIT 806	■ Add			
		AVENTURA, FL 33180	Remove			
			☐ Change			
MGR	JOSE D, LOPEZ	3370 NE 190 STREET UNIT 806	□ Add			
		AVENTURA, FL 33180	Remove			
		•	□ Change			
<u>s</u>	MARIBEL LOPEZ PORRAS	3370 NE 190 STREET UNIT 806				
		AVENTURA, FL 33180	OR MINOR			
			Echange 5			
			□ Remove			
			Change			
			□ Add			
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E. Effective date, if other than (If an effective date is listed, the date Note: If the date inscribed in the document's effective date on the	is block does not me	ect the applicable	te of filing or more than statutory filing requir	(optional) 90 days after filing.) Pur ements, this date will	suant to 605, not be liste	0207 (3)(d ns the	(b)
If the record specifies a dela (b) The 90th day after the	ayed effective da record is filed.	ate, but not ar	effective time, a	t 12:01 a.m. on	the earlie	er of:	
Dated	······································	2016					
	"Com o da						
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