L040000 \$7148

(1	Requestor's Name)		
(,	Address)	~	
(,	Address)	,	
(1	City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL	
(1	Business Entity Name)		
(1	Document Number)		
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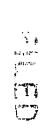
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SECRETARY OF STATE



COVER LETTER

TO: Regis

Registration Section
Division of Corporations

CHDICZY	514 BENTI	LEY BEACH LLC		
SUBJECT:		Name of Limit	ed Liability Company	
The enclosed	l Articles of An	nendment and fee(s) are subn	nitted for filing.	
Please return	all corresponde	ence concerning this matter to	o the following:	
		CHRISTIAN BERUB	E	
			Name of Person	
		JJN IRREVOCABLE	TRUST	
•			Firm/Company	
		1717 N. BAYSHORE	DRIVE, SUITE 213	
			Address	
		MIAMI, FLORIDA 33	3132	
			City/State and Zip Code	
		CBERUBE@GROUP		
	•	E-mail address: (to	be used for future annual rep	port notification)
For further in	nformation cond	eerning this matter, please ca	II:	
CHRISTI	AN BERUB	E	305 523	-3348
	Name of Po	erson	Area Code	Daytime Telephone Number
Enclosed is a	a check for the t	ollowing amount:		
■ \$25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy	□ \$60.00 Filing Fee. Certificate of Status &

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

514 BENTLEY BEACH LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on DECEMBER 2, 2004 Florida document number L04000087148 This amendment is submitted to amend the following:	4 and	d assig	gned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability company here:			
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the a	abbreviati	on "L	L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter registered agent and/or the new registered office address here:	the na	me o	f the new
Name of New Registered Agent:	<u>ت</u> در		
New Registered Office Address:		Gr.	
Enter Florida street address	ريفي الأثير 	=	
. Florida	188 188	2	
City	∵ Zıp (AC.	
New Registered Agent's Signature, if changing Registered Agent:		99	atamani F F E
I hereby accept the appointment as registered agent and agree to act in this capacity. I further age provisions of all statutes relative to the proper and complete performance of my duties, and I am jaccept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, being filed to merely reflect a change in the registered office address. I hereby confirm that the lin	f gn illiar if this c	∰ply with locum	and nent is

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

<u> Fitle</u>	<u>Name</u>	Address	Type of Action
MGRM	CHRISTIAN BERUBE	1717 N. BAYSHORE DRIVE, SUITE 21	5 □ Add
		MIAMI, FL 33132	■ Remove
MGR	CHRISTIAN BERUBE	1717 N. BAYSHORE DRIVE, SUITE 21	 { ■ Add
		MIAMI, FL 33132	□ Remove
			□ Add □ Remove
			 □ Add
			□ Remove
		ALLAHASSEE	5 JA dd 1/2
		FLORIDA	99 24
			_□ Remove

D. If amending any other information,	enter change(s) here: (Attach a	idditional sheets, if necessary.)
,		
	<u> </u>	
Effective date, if other than the date (The effective date must be specific, cannot be a the date this document is filed by the Florida I	of filing: prior to date of receipt or filed date and each pepartment of State)	(optional) annot be more than 90 days after
Dated DECEMBER 15	2014	
Patr	>	
	ture of a member or authorized represer	ntative of a member
CHRISTIAN BERUBE		
	Typed or printed name of sign	11/20

Page 3 of 3

Filing Fee: \$25.00

SECRETARY OF STAT