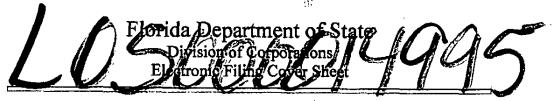
P.001/006 Page 1 of 2



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From:

Account Name : LAW OFFICE OF PAUL A. KRAS Account Number : I20090000078

Phone : (561)801-7312 Fax Number

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COVER LETTER

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SUBJEC		Name of Limited Liability Company			
The engli	and Arialan of	Amendment and fec(s) are sub	mitted for filing		
			۸.		
Please re	turn all correspo	ndence concerning this matter	to the following:		
		HARRY B. ROSENTHAL	L		
			Name of Person		
			Firm/Company		
		4796 N. CONGRESS AVI	ENUE		
			Address		
		BOYNTON BEACH, FL	33426	2017 A SECRE ALLA	Ť
		hbr101199@gmail.com	City/State and Zip Code	AUG 15 DRETARY AHASSE	
		E-mail address: (to be used for future annual report notific	cation) High	IT
For furth	ner information c	oncerning this matter, please c	all:	A e.	
Andrea	Murphy		561- 515-4722	9: 08	
	Name o	f Person		Telephone Number	
Enclosed	d is a check for th	ne following amount:			
\$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)	
	Registr	ING ADDRESS: ration Section on of Corporations	STREET/COURIE Registration Section Division of Corpora	- -	

Division of Corporations P.O. Box 6327 Tallahassec, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

4170002162143

HITOODIGUS ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lim	(A Florida Limited	inv as it now appears on Liability Company)	our records.)	_
The Articles of Organization for this Limited I Florida document number L05000014995	iability Company	were filed on 02/09/	2005 and	d assigned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liab	ility company here:		
NA				
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the design	nation "LLC" or the abbreviation	n "L.L.C."
Enter new principal offices address, if appli	cable:	NA		
(Principal office address MUST BE A STRE.			ALL SE	**************************************
			AH	
Enter new mailing address, if applicable:		NA .	ARY S	2
(Mailing address MAY BE A POST OFFICE	BOX)		<u></u>	>
B. If amending the registered agent and	l/or registered o	ffice address on ou	RICE ADA	ှာ ထ ထ me of the n
registered agent and/or the new registered (
Name of New Registered Agent:	NA			
New Registered Office Address:				
		Enter Florida s	treet address	
		<u></u>	, Florida	
		City	Ztp C	iode .

New Registered Agent's Signature, if changing Registered Agent:

ARR REALTY INVESTMENTS, LLC

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

Page 1 of 3

417002162143

MGR = Manager

Change

4170002162143

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR = Authorized Member Title <u>Address</u> Type of Action Name HARRY B. ROSENTHALL 4796 N. CONGRESS AVENUE MGR bbA □ BOYNTON BEACH, FL 33426 ☐ Remove Change 181 □ Add □ Remove Change □ Add Remove □ Change LLAH) □40move D Q6hange C 0 © Add □ Remove ☐ Change _□ Add □ Remove

Page 2 of 3

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Page 3 of 3 Filing Fee: \$25.00

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