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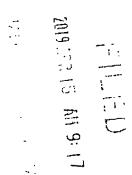
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COVER LETTER

	istration Sec ision of Corp			
SUBJECT:	ONE VEN	MIAMI PROPERTIES, LLC		
		Name of Limi	ited Liability Company	
The enclosed	l Articles of A	Amendment and fects) are sub-	mitted for filing.	
Please return	all correspor	ndence concerning this matter	to the following:	
		JUAN SANTAELLA		
			Name of Person	
		PASAN INVESTMENT	, INC	
		•	Firm Company	
		2310 W WATERS AVE	SUITE D	
			Address	
		TAMPA, FL 33604		
			City/State and Zip Code	
		INFO@PASAN-SERVI E-mail address: (1	CES.COM to be used for future annual report notifi	ication)
For further is	nformation co	oncerning this matter, please ca	all:	
JUAN S	ANTAELLA		at (<u>813</u>) 849-2878	
	Name of	Person	Area Code Daytime	: Telephone Number
Enclosed is a	check for th	e following amount:		
Ď \$25.00 F	iling 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

	2019: 15	
)	•	/>

ONE VEN MIAMI PROPERTIES, 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 JUNE 29, 2005 and assigned Florida document number L05000064846 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: ONE VEN FLORIDA PROPERTIES, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." N/A Enter new principal offices address, if applicable: N/A (Principal office address MUST BE A STREET ADDRESS) N/A N/A Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) N/A B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: N/A Name of New Registered Agent: N/A New Registered Office Address: Enter Florida street address N/A , Florida Cin 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.

N/A	
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

<u>Title</u>	<u>Name</u>	Address	Type of Action
N/A	N/A	N/A	□ Add
			□ Remove
			□ Change
			Remove
			Change
			Add
			□ Remove
			□ Change
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Effectiv	re date, if other than the date of filing: APRIL 12, 2019 (optional)
II an effec	ctive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020
	f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
aoc mne	nt's effective date on the Department of State's records.
he reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier o
The 9	90th day after the record is filed.
Dated_	APRIL 12 / // 2019
_	
	I VAMT DOA
	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00