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SEP 17 2014 D. BRUCE

## **COVER LETTER**

TO: Registration Se Division of Cor					
New '	Wave Realty I	LLC			
SUBJECT:		ited Liability Company	<del></del>		
	Amendment and fee(s) are sub				
	Cristina Vas	quez			
•	•••	Name of Person			
New Wave Realty LLC					
	<del></del>	Firm/Company			
	3050 Biscay	ne Blvd, Ste 301			
		Address			
	Miami, FL 3	3137			
		City/State and Zip Code			
	cristina@cardina	•	<u> </u>	201	
		to be used for future annual report notifica	tion)	38	T
For further information co	oncerning this matter, please co	all:			, THE N
Cristina Va	squez	<sub>at</sub> 305, 536-14	90	866 <b>70</b>	in the state of th
Name o	f Person	Area Code Daytime To	elephone Number	PH 3: 47	£.,,,
Enclosed is a check for th	ne following amount:			<b>基</b> 學	
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate o Certified Co (additional cop	of Status &	

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

New wave Really LLC			
(Name of the Lim	ited Liability Company (A Florida Limited Lia	as it now appears on our record bility Company)	<u>ds.</u> )
The Articles of Organization for this Limited L Florida document numberL05000082241	Liability Company w		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liabili	ty company here:	
The new name must be distinguishable and end with the	e words "Limited Liabili	ty Company," the designation "Ll	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE)  B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:	d/or registered offi	ce address on our record	ds, enter the name of the nev
	3050 Riscavi	ne Blvd, Ste 301	A S
New Registered Office Address:	- COOO Biscayi	Enter Florida street addre	SSS CONTRACTOR OF THE PARTY OF
	Miami	F	lorida 33137 - 7
		City	Zip Code
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as register provisions of all statutes relative to the pro- accept the obligations of my position as reg being filed to merely reflect a change in the company has been notified in writing of this	per and complete p gistered agent as pr e registered office a	erformance of my duties, a ovided for in Chapter 605,	md I am familiar with and F.S. Or, if this document 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 AMBR = Authorized Member **Title** <u>Address</u> **Type of Action Name** 3050 Biscayne Blvd, Ste 301 D Add CD 22 Corp MGR Miami, FL 33137 **■** Remove 3050 Biscayne Blvd, Ste 301 MGRM Cardinal Development Corp. NY Miami, FL 33137 ☐ Remove ☐ Add ☐ Remove ☐ Remove ☐ Remove

	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
. (	Correct current place of business / mailing address is:
	3050 Biscayne Blvd, Ste 301
_	Miami, FL 33137
_	
_	
(The effe	ive date, if other than the date of filing:  ctive date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after this document is filed by the Florida Department of State)
Dated	September 8 2014
	Signature of a member or authorized representative of a member
	Irene Arditi, for Cardinal Development Corp NY, MGRM
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

