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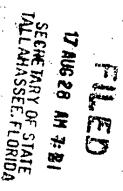
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## **COVER LETTER**

|             | tegistration Sec<br>Division of Cor |   |   |   |  |  |
|-------------|-------------------------------------|---|---|---|--|--|
| erin iises  |                                     | ders 184, LLC   |   |   |  |  |
| SUBJEC      | r:                                  |   | ited Liability Company  |   |  |  |
| The enclos  | sed Articles of a                   | Amendment and fee(s) are sub-   | mitted for filing.  |   |  |  |
| Please rete | arn all correspo                    | ndence concerning this matter   | to the following:   |   |  |  |
|             |                                     | Guillermo Kubler  |   |   |  |  |
|             |                                     |   | Name of Person  |   |  |  |
|             |                                     | Eureka Builders 184, LLC  |   |   |  |  |
|             |                                     |   | Firm/Company  |   |  |  |
|             |                                     | PO BOX 26806  |   |   |  |  |
|             |                                     | Address   |   |   |  |  |
|             |                                     | Tamarac, FL 33320   |   |   |  |  |
|             |                                     | City/State and Zip Code   |   |   |  |  |
|             |                                     | nmatammg@gmail.com  1:-mail address: (to be used for future annual report notification) |   |   |  |  |
| For furthe  | r information ed                    | neerning this matter, please ca   | ·   | Culton  |  |  |
| Guillermo   | Kubler                              |   | 305 8129186   |   |  |  |
|             | Name of                             | Person  | at ()   | Telephone Number  |  |  |
| Enclosed i  | is a check for th                   | e following amount:   |   |   |  |  |
| □ \$25,00   | ) Filing Lec                        | □ \$30.00 Filing Fee &<br>Certificate of Status   | □ \$55.00 Filing Fee & Certified Copy tadditional copy is enclosed) | □ \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

| Eureka Builders 184 LLC   |  |   |                       |  |
|---|--|---|-----------------------|--|
| (Name of the Lim  | ited Liability Compa<br>(A Florida Limited I | ny as it now appears on our records.)<br>.iability Company) |                       |  |
| he Articles of Organization for this Limited I<br>lorida document number # L06000025057 |  | were filed on March, 08,2006                                | and assigned          |  |
| his amendment is submitted to amend the fol   |  |   |                       |  |
| . If amending name, enter the new name of   | of the limited liab                          | ility company here:   |                       |  |
| te new name must be distinguishable and contain the                                     | words "Limited Liabil                        | ity Company," the designation "L.L.C" or the                | abbreviation "L.L.C." |  |
| Enter new principal offices address, if applicable:                                     |  | 110 SW 12 St Unit 1405 Miami, FL 33130                      |                       |  |
| Principal office address MUST BE A STRE.  | ET ADDRESS)                                  |   |                       |  |
| Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)    |  | PO BOX 26806 Tamarac, FL 33320                              |                       |  |
| . If amending the registered agent and  | l/or registered of                           |   | er the name of the ne |  |
| Name of New Registered Agent:   | once address ner                             | <u> </u>  | ME TARY               |  |
| New Registered Office Address:  | 110 SW 12 St U                               | Jnit 1405 Miami, FL 33130                                   | 79 <b>3 17</b>        |  |
|   | Miami,                                       | Enter Florida street address Florida                        | ORAL SE               |  |
|   | ,  | . riorida -   | Zin 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 |             |         |                |
|--------------------------|-------------|---------|----------------|
| <u>Title</u>             | <u>Name</u> | Address | Type of Action |
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| J. II AL           | mending any other information, enter change(s) here: (Attach additional sheets, if necessary.  | <i>,</i><br>               |                  |                      |
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| r ree.             | 08-22-2017   |                            |                  |                      |
| Note               | ctive date, if other than the date of filing:  effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)  E. If the date inserted in this block does not meet the applicable statutory filing requirements, this date varient's effective date on the Department of State's records. | Pursuant to<br>vill not be | 605.02<br>listed | 207 (3)(b)<br>as the |
| (f the r<br>(b) Th | record specifies a delayed effective date, but not an effective time, at 12:01 a.m. one 90th day after the record is filed.  | on the e                   | arlier           | of:                  |
| Date               | 08-22-2017   |                            |                  |                      |
| Dail               | Fifther I  |                            |                  |                      |
|                    | Signature of a member or authorized representative of a member   |                            | -                |                      |
|                    | Guillermo Kubler   |                            |                  |                      |
|                    | Timed at printed name of singer  |                            |                  |                      |

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Filing Fee: \$25.00