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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone

: (305)634-3694

Fax Number

: (305)633-9696

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email	Address:			

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

6420 LOFTS, LL	iC
Certificate of Status	1
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J. BRYAN

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EMPIRE CORP PAGE 01/05





## **COVER LETTER**

TO:

Registration Section Division of Corporations

SHBJECT:

6420 Lofts, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filling.

Please return all correspondence concerning this matter to the following:

Lee C. Schmachtenberg

Name of Person

Schmachtenberg & Associates

Firm/Company

1533 Sunset Dr., Ste. 201

Address

Coral Gables, FL 33143

City/State and Zip Code

fgav4615@aol.com

E-mail eddress: (to be used for future somual report notification)

For further information concerning this matter, please call:

Lee C. Schmachtenberg

at 305 666-4676

Name of Person

Area Code & Davtime Telephone Number

Enclosed is a check for the following amount:

D) \$25.00 Filing Fee

☐\$30,00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

\$360.00 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/COUNTER ADDRESS: Registration Section Division of Corporations Clifton Building

Clifton Building 2661 Executive Center Circle Tuliahassee, FL 32301

H1300017167

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE WEST TO

6420 Lofts, 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 Liab	were filed on 05/11	/2006	_ and assigned		
Florida document number L06000048821		-			
rionas document number	<del></del> '				
This amendment is submitted to amend the follow	ing:				
A. If amending name, enter the new name of the	a limited Rah	ility company hero-			
AL 11 statements mante, enter the new traine of the	ic littired than	mrs company nore.			
	1 1 4/7 · .	5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Man a de atau arte a MT e A	751	
The new name must be distinguishable and end with t "L.L.C."	ne words "Limi	ted Liability Company,	the designation _ffr	or the addreviation	
Enter new principal offices address, if applicab	le:	811 Ponce De Leon, Ste. 100			
(Principal office address MUST BE A STREET)		Coral Gables, 33134			
		811 Ponce De l	lean Ste 100		
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)		Coral Gables, 33134			
		•			
B. If amending the registered agent and/or			records, enter the	name of the new	
registered agent and/or the new registered offic	e uddress her	<u>e</u> :			
		١ ٥		•	
Name of New Registered Agent:	45(DOC	od a Gavar	(lete		
New Registered Office Address:	RII POC	ice de lecr	1. Str. 100	<b>7</b>	
NEW RESISTERED OFFICE AUDIES.	011 10.		Florida street ackire	5.3	
	A		20	. 90	
	COLOT	5000	, Florida 📿		
		City		Zip Code	
New Registered Agent's Signature, if changing Res	ristered 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 608, 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.

Registered Agent, Standare of New Registered Agent

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

MGR = Manager MGRM = Managing Member				
Title	<u>Name</u>	Address	Type of Actions	
			Add E	
			Type of Actions  Type of Actions  Remove  Add Date	
			Add jr	
			Remove	
			Add	
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			Add	
			Remove	
			Add	
			Remove	
			Add	
			Remove	

Page 2 of 3

13 14 40	and in any other information and the second bases (fundament)
D. IT AI	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	The second secon
	(-/11/D)
	64120 YILDS, LLLY
	By: 642010ft3, LLC
Dated _	July 31 , 2013.
	Richtiento Mounts
	Signature of a monther or authorized sepresentative of a member
	Typed or printed name of signes
	Page 3 of 3

Filing Fee: \$25.00

SECRETARY OF STATE

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