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#### ATTORNEYS AT LAW



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Miami Tower 100 S E Second Street | Suite 4200 Miami, Florida 33131-2113 P.O. Box 019101 | Miami, Florida 33101-9101 305 530 0050 | fax 305 530 0055 www.carltonfields.com

Casta Puello Legal Administrative Assistant (305) 539-7248 cpuello@caritontields.com

August 14, 2018

Atlanta Hartford Los Angeles Miami New York Orlando Tallahassie Tampa Vashington DC West Polm Beach

### VIA FEDERAL EXPRESS

Florida Department of State Registration Section Division Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

### Re: Kenilworth 605, LLC Our File No.: 12299-33638

Dear Sir/Madam:

In connection with the subject matter, enclosed please find check #7095 in the amount of \$25.00 and the Articles of Amendment of Kenilworth 605, LLC for filing.

Please do not hesitate to contact me should you have any questions.

Very truly yours,

Carlton Fields Jorden Burt, P.A.

Casta Puello

CP: Enclosures

### **COVER LETTER**

TO: Registration Section Division of Corporations

SUBJECT: \_\_\_\_ Kenilworth 605, LEC

Name of Limited Liability Company

The enclosed Articles of Amendment and feets) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michele B. Soffness, esq.

Name of Person

Carlton Fields Jorden Burt, P.A.

Firm/Company

100 SE Second St. # 4200

Address

Miami, Florida 33131

City/State and Zip Code

msoftness@carltonfields.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 Casta Puello
 at (305)
 539-7248

 Name of Person
 Area Code
 Daytime Telephone Number

Enclosed is a check for the following amount:

⊑<sup>IX</sup>\$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)

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

|                                                          | Kenilworth 605, LLC                                                                                           |
|----------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| now appears on our records,)<br>Company)                 | (Name of the Limited Liability Company as it no<br>A Horida Limited Liability C                               |
| iled on and assigned                                     | The Articles of Organization for this Limited Liability Company were file Florida document numberL06000098981 |
|                                                          | This amendment is submitted to amend the following:                                                           |
| ompany here:                                             | A. If amending name, enter the new name of the limited liability com                                          |
| ipany," the designation "LLC" or the abbreviation "LLC," | The new name must be distinguishable and contain the words "Limited Liability Compa                           |
| <u></u>                                                  | Enter new principal offices address, if applicable:                                                           |
|                                                          | (Principal office address MUST BE A STREET ADDRESS)                                                           |
|                                                          |                                                                                                               |
| S SAL                                                    |                                                                                                               |
|                                                          | Enter new mailing address, if applicable:                                                                     |
| 12: RAT                                                  | (Mailing address MAY BE A POST OFFICE BOX)                                                                    |
| <b>1</b> 0                                               |                                                                                                               |
| PH 12:                                                   | Enter new mailing address, if applicable:<br><u>(Mailing address MAY BE A POST OFFICE BOX)</u>                |

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new</u> registered agent and/or the new registered office address here:

| Name of New Registered Agent:  |                        |           |
|--------------------------------|------------------------|-----------|
| New Registered Office Address: | Ester Florala street a | diress    |
|                                |                        | . Florida |
|                                | City                   | Zip 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. Thereby 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 addedor removed from our records:Changing Title of each from MGRM to MGR

# MGR = Manager

| Title | Name                 | Address                 | Type of Action |
|-------|----------------------|-------------------------|----------------|
| MGR   | Schwartz, Daniel M.  | 1172 S. Dixie Hwy, #352 | Add            |
|       |                      | Coral Gables, FI 33146  | Remove         |
|       |                      |                         |                |
| MGR   | Schwartz, Ana Stella | 1172 S. Dixie Hwy, #352 | 🖾 Add          |
|       |                      | Coral Gables, FI 33146  | Remove         |
|       |                      |                         | Change Title   |
| MGR   | Schwartz, Alain M.   | 1172 S. Dixie Hwy, #352 | Add            |
|       |                      | Coral Gables, FL 33146  | Remove         |
|       |                      |                         | CC hange Title |
| MGR   | Schwartz, Rebeca     | 1172 S. Dixie Hwy, #353 | Add            |
|       |                      | Coral Gables, FI 33146  | 🗆 Remove       |
|       |                      |                         | D Change Title |
|       |                      |                         | O Add          |
|       |                      |                         | Remove         |
|       |                      |                         | Change         |
|       |                      |                         | 🖸 Add          |
|       |                      |                         | C Remove       |
|       |                      |                         | Change         |

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### D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

| Dated | 8/7/18                                                         |
|-------|----------------------------------------------------------------|
| _     | David Stand                                                    |
|       | Signature of a member or authorized representative of a member |
|       | Daniel Schwartz                                                |
| -     | Typed or printed name of signee                                |

Page 3 of 3

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