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LALBRITTON

COVER LETTER

Name of Limited Liability Company
nt and fee(s) are submitted for filing.
ncerning this matter to the following:
Auletto
Name of Person
dra-Goodwin
Firm/Company
E. 17th Street, 2nd Floor
Address
Buderdale, FL 33316
City/State and Zip Code
@saavlaw.com
E-mail address: (to be used for future annual report notification) this matter, please call:
954 767-6333
Area Code Daytime Telephone Number
g amount:
00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, tificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Street Address: Registration Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
S.I.L.

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liability Company as it now a</u> (A Florida Limited Liability Comp	ppears on our records.) any)
The Articles of Organization for this Limited Liability Company were filed of Florida document number L08000077415	on 08/12/2008 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability compa	ny here:
The new name must be distinguishable and contain the words "Limited Liability Company,"	the designation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	622
	
	· ω
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
	59
B. If amending the registered agent and/or registered office address on or agent and/or the new registered office address here: Name of New Registered Agent:	our records, <u>enter the name of the new reg</u> i
New Registered Office Address: Ente	er Florida street address
	, Florida
City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

BDR I, LLC

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
MGR	Damaso W. Saavedra	Saavedra-Goodwin	□Add
		312 S.E. 17th Street, 2nd Floor	■Remove
		Fort Lauderdale, FL 33316	□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
•			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change

Effective date, if other than the date of filing: [Optional] If an effective 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 605.0207 (Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t document's effective date on the Department of State's records. 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 red is filed. Dated August 11 2020 Signature of a member or authorized representative of a member Damaso W. Saavedra		
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	Dated	August 11 , 2020
Domaco W. Saguadas		Signature of a member or authorized representative of a member
Liontono III. Enguadas		Daniel W. C.