To:

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GUZMAN & GUZMAN, P.A.

Account Number : 120080000090

Phone : (305)670-1991

Fax Number : (305)670-1993

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

C11	Address:			
rmaı (AUDITES :			

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AUG 23 2019

From: Paola Sanchez

To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OBERCANTOR, LLC				
(Name of the Limited L.	iability Company as it now appears on our records. lorida Limited Liability Company)	<u>.</u>)		
The Articles of Organization for this Limited Liabil Florida document number 1.08000078723		and assigned		
This amendment is submitted to amend the following	ı k :			
A. If amending name, enter the new name of the	limited liability company here:			
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC"	'or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable	::			
(Principal office address MUST BE A STREET A				
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BO)	<u></u>			
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records address here:	, enter the name of the		
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida street address	Enter Florida street address		
	, Flo	orida		
	(A)	<u>-</u>		
New Registered Agent's Signature, if changing Regil I heroby accept the appointment as registered as		rther agree to comply with		
provisions of all statutes relative to the proper a	ind complete performance of my auties, an	ia ram jamatar wan arte		

accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this docume 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

From: Paola Sanchez

Fax: 17864757424

To:

Fax: (850) 617-6383

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08/22/2019 12:39 PM

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

Title	Name	Address	Type of Action
MGR	G & G MANAGEMENT US LLC	9130 S DADELAND BLVD SUITE 1509 MIAMI FL, 33156	
			□ Remove
			Change
MGR	KEMPNER, CLARA	1390 BRICKELL AVENUE SUITE 200 MIAMI FL, 33131	
			■ Remove
			Change
			Remove
			☐ Change
			Remove
			Change
	,		Add
			□ Rcmove
			Change
			Add
			D Remove
			☐ Change

Page: 5 of 5

To:

ъ. и мин	ending any other information, enter change(s) here: (Anach additional sheets, if necessary)
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Notu: If t	date, if other than the date of filling: we date is listed, the date must be specific and councit be print to date of filling or more than 90 days after filing.) Pursuant to 605.0207 (3) the date inserted in this block does not meet the applicable statutory filling requirements, this date will not be listed as the seffective date on the Department of State's records.
the record) The 90 A	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: UGU3T 20 -
Dated	2019 Signature of a mainber or authorized representative of a member
	KENPNER, CLARA - acting manager
-	Typed or printed name of sigure

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