L10000012332

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
· (Cit	ty/State/Zip/Phone	÷#)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nam	ne)		
(Do	cument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Úse Only



800263670478

09/12/14--01023--001 **1660.00

2014 SEP 12 PH 3: 10

SEP 17 2014

T CLINE

COVER LETTER

TO: Registration S Division of Co				
SUBJECT:	5675 N 5	5 AVENUE, LLC		
				
	f Amendment and fee(s) are sulpondence concerning this matter	·		
		Carmen Fanego		
	Name of Person			
	TotalBank			
	SSE 7			
		Address	2014 95P 12 PM 3: 10 SEGRETARY OF STATE FALLAHASSEE, FLORID	
Miami, FL 33131				
		City/State and Zip Code	S	
	E-mail address: (anego@totalbank.com to be used for future annual report notification)		
For further information	concerning this matter, please of			
Ca	rmen Fanego	at (_305)476-62	69	
Name	of Person	Area Code & Daytime Telephon	e Number	
Enclosed is a check for	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	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 ADD Registration Section Division of Corporations Clifton Building 2661 Executive Center Circl Tallahassee, FL 32301		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

5675	N 5 AVENUE, LLC		
(<u>Name of the Limited Liab</u> (A Flor	pility Company as it now appe ida Limited Liability Company	ars on our records.)	•
The Articles of Organization for this Limited Liabili Florida document numberL10000012332	ty Company were filed on		and assigned
This amendment is submitted to amend the following A. If amending name, enter the new name of the	g: limited liability company h	-	2014 SEP 12 PM SECRETARY OF FALLAHASSEEL
The new name must be distinguishable and end with the "L.L.C."			
Enter new principal offices address, if applicables		Street, 32nd Floo	<u>r ''</u>
(Principal office address MUST BE A STREET AL	DDRESS) Miami, FL 3	33131	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	- · · · · · · · · · · · · · · · · · · ·	Street, 32nd Floo	
B. If amending the registered agent and/or registered agent and/or the new registered office and Name of New Registered Agent: New Registered Office Address: 10			the name of the new
new registered Office Address.	dress		
	Miami City	, Florida	33131 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, 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 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 Action ☐ Add Remove ☐ Add Remove ∏Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) New address for all the MGRs: 100 SE 2nd Street, 32nd Floor Miami, FL 33131 August 12 2014 Dated ___ Signature of a member or authorized representative Carmen Fanego Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00