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Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : SIEGELAUB, ROSENBERG, GOLDING & FELLER, P.A.

Account Number: I19990000058
Phone: (954)753-2222

Fax Number : (954)753-1123

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

Email Address: andrea@ 5/egelaub. com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 1311 NW 65TH PLACE, LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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1311 NW	65th Place LLC
(Name of the Limit	ed Liability Company as il now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Lie Plorida document number 410000 //5	
This amendment is submitted to amend the follow	:gniwo
A. If amending name, enter the new name of	f the limited liability company here:
The new name must be distinguishable and contain the w	ords "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	яblo:
(Principal office address MUST BE A STREE	T ADD RESSI
Enter new mailing address, if applicable:	
(Mutling address MAY BE A POST OFFICE !	<u>BOX)</u>
B. If amending the registered agent and/or the new registered of	or registered office address on our records, enter the name of the new fice address here:
Name of New Registered Agent;	
New Registered Office Address:	Enter Florida street address
·	,
	, Florida City Zip Code
New Registered Agent's Signature, if changing R	legistered 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 Now Registered Agent

Page 1 of 3

\_ Change

If amendin	g Authorized Person(s) authori from our records:	zed to manage, <u>enter the title, name, and address of cach</u>	person being added
MGR = N AMBR = A	Ianager Luthorized Member		
<u> Title</u>	Name	Address	Type of Action
HGRM	Bichard Schneider		D Add
		Ft Lauderdale, FL 33309	
			Chango
A <u>ubr</u>	Prichard + Mariaine S	Schneider Revocable Living Trust	DAdd
		1311 NW 65th PI	□ Rensove
		F+ Lauderdale, FL 33309	_O Charles 2015 T
		****	_OAdd 芸了 C
			Charge Change Change Change
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. Effectiv	re date, if other than the date of filing: (optional)	
140107	re date, if other than the date of filing:	0207 (3)(b) d as the
the reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie 90th day after the record is filed.	r of:
Dated _	Sept 8, 2015.	
	Signature of a thember or authorized representative of a member  Richard Schneider	

Page 3 of 3 Filing Fee: \$25.00