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MAR 10 2017

S. YOUNG

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** EVERGLADES 613, LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

SHAR-ANN CALLAHAN

Name of Person

ARNSTEIN & LEHR LLP

Firm/Company

200 E LAS OLAS BLVD., STE. 1000

Address

FORT LAUDERDALE, FL 33301

City/State and Zip Code

scallahan@arnstein.com

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

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For further information concerning this matter, please call:

Shar-Ann Callahan at 954 713-7635  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$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**

EVERGLADES 613, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 11/08/2010 and assigned  
Florida document number L10000116203.

This amendment is submitted to amend the following:

**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:**

581 C E Sample Rd.

**(Principal office address MUST BE A STREET ADDRESS)**

Pompano Beach, FL 33064

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

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

Name of New Registered Agent:

DOUGLAS KNISKERN

New Registered Office Address:

200 E LAS OLAS BLVD. STE. 1000

*Enter Florida street address*

FORT LAUDERDALE

, Florida

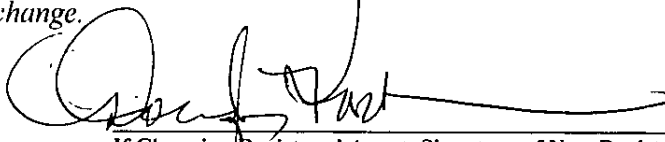
33301

*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, 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>	<u>Address</u>	<u>Type of Action</u>
MGR	JACOB MELDUNG	111 N Pompano Beach Blvd	<input type="checkbox"/> Add
		Pompano Beach, FL 33062	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DANIEL MELDUNG	581 C E Sample Rd.	<input checked="" type="checkbox"/> Add
		Pompano Beach, FL 33064	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper appears to be a standard notebook page or a sheet of stationery. There is no handwriting or other markings on the page.

11 FEB 1964  
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WASHINGTON, D.C. 20301  
17 MAR -9 PM 12:01

**E. 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 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 January 31, 2017

  
Signature of a member or authorized representative of a member

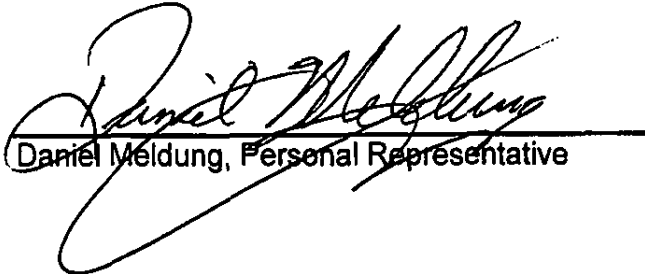
DANIEL MELDUNG

Typed or printed name of signee

**Resolution of Sole Member  
Everglades 613, LLC**

Daniel Meldung, as Personal Representative of the Estate of Jacob Meldung (the "Estate"), as the sole member of Everglades 613, LLC, a Florida Limited Liability Company (the "Company"), on January 23<sup>rd</sup>, 2017, resolves as follows:

1. That Daniel Meldung is appointed as the Managing Member of the Company and shall serve until removed or replaced.
2. That the Managing Member of the Company above may conduct any business, enter any transaction and do any act as provided under Chapter 605 of the Florida Statutes.

  
Daniel Meldung, Personal Representative

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