L10000129111

| (Requestor's Name) |
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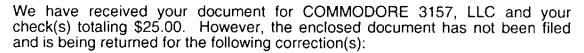
FLORIDA DEPARTMENT OF STATE Division of Corporations

October 19, 2017

GUILLERMO R CRUZ 201 ARVIDA PKWY MIAMI, FL 33156

SUBJECT: COMMODORE 3157, LLC

Ref. Number: L10000129111



Complete page 3 of 3 of application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Pijeaux Regulatory Specialist

Letter Number: 917A00021165

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| SUBJEC | <u>,</u> | | | | | |
| | | Amendment and fee(s) are sub | | | | |
| | | Guillermo R. Cruz | | | | |
| | | • | Name of Person | | | |
| | | | Firm/Company | | | |
| | | 201 Arvida Pkwy | | | | |
| | | Miami El 33156 | Address | | | |
| | Miami, FL 33156 City/State and Zip Code | | | | | |
| | | jdev@cruzbuildings.com E-mail address: (| to be used for future annual report notifi | cation) | | |
| For furth | er information c | oncerning this matter, please co | · | | ~ ~ | |
| Jay Dev | | | 305 439-6040 at () | | : ; | : |
| | Nатте о | f Person | | Telephone Number | | |
| Enclosed | l is a check for th | ne following amount: | | : : - | | 1 , |
| \$25. | 00 Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | S60.00 Filing Certificate of Certified Co (additional cop | g Fee. of Status & opy | |
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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

Commodore 3157, 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 12/17/2010 Florida document number <u>E10000129111</u> 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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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: New Registered Office Address: Enter Florida street address , Florida

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> | Name | Address | Type of Action |
|--------------|----------------|-------------------------|---------------------|
| MGR | Rafael L. Cruz | 401 Casuarina Concourse | ■ Add |
| | | Miami, FL 33156 | ☐ Remove |
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Page 3 of 3

Filing Fee: \$25.00