

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 637-6383

From:

Account Name : LEOPOLD KORN & LEOPOLD, P.A.
Account Number : 120010000025
Phone : (766) 899-2235
Fax Number : (305) 925-9042

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

Email Address: Marina@sbirealty.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
3720 CROYDON LLC

Certificate of Status	1
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JUN 30 2015

J SHIVER

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

3720 CROYDON 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 DECEMBER 13, 2011 and assigned
Florida document number L11000139863.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here: NA

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:

NA

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

NA

(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:

NA

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 JUN 29 AM 9:09
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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.

NA

If Changing Registered Agent, Signature of New Registered Agent

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If amending Authorized Persons) 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>
MGRM	PCCO, INC	1680 MERIDIAN AVENUE, #102	<input type="checkbox"/> Add
		MIAMI BEACH, FL 33139	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGRM	NATHAN LIEBERMAN	1680 MERIDIAN AVENUE, #102	<input type="checkbox"/> Add
		MIAMI BEACH, FL 33139	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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D. If amending any other information, enter changes) here: *(attach additional sheets if necessary)*

1. The Title of PCCO, INC., is hereby changed from the Managing Member to Manager.
2. The Title of NATHAN LIEBERMAN is hereby changed from the Managing Member to Manager.

E. Effective date, if other than the date of filing: June 26, 2015 (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 June 26 2015


 Signature of a member or authorized representative of a member

GARY A. KORN, Authorized Agent

Typed or printed name of signer

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