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FEB 1 5 2019 J. HARRIS

COVER LETTER

Div	ision of Corp	oorations -		
CHOLECT.		rive Apt 4K LLC		
SUBJECT:		Name of Limit	ed Liability Company	_
The enclosed	d Articles of A	Amendment and fee(s) are subm	nitted for filing.	
Please return	all correspor	ndence concerning this matter to	o the following:	
		Manuel L. Crespo		
			Name of Person	
		Greenspoon Marder LLC		
			Firm/Company	
		600 Brickell Avenue Suite 3	3600	
		_	Address	
		Miami, Florida 33131		
			City/State and Zip Code	
		manny.crespo@gmlaw.com		
		E-mail address: (to	be used for future annual report notific	ation)
For further is	nformation co	ncerning this matter, please cal	l:	
Manuel L. C	Trespo		305 789-2770 Area Code Daytime T	
	Name of	Person	Area Code Daytime I	Felephone Number
Enclosed is a	check for the	e following amount:		
□ \$25.00 F	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:

TO:

Registration Section

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

6900 Bay Drive Apt 4K 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 $\frac{02/03/2012}{}$ _____ and assigned Florida document number L12000016381 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: (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

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.

City

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>	Type of Action
MGRM	Ligia Quintero De Correa		Add
			■ Remove
			☐ Change
MGR	Paula Andrea Correa Quintero	Calle 134 10-A Apt. 401	■ Add
		Edificio Romania IV	☐ Remove
		Bogota, Colombia	Change
MGR	Monica Fernanda Correa Quintero	Calle 134 10-A Apt. 401	
		Edificio Romania IV	☐ Remove
		Bogota, Colombia	Change
			Remove
			Change
			Add
			Remove
			☐ Change
			□ Remove
			Change

lf am	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Note	tive date, if other than the date of filing: [Coptional] (ffective 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 605,020 [If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ment's effective date on the Department of State's records.
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of e 90th day after the record is filed.
Dated	Letruary 8 . 2018
	Signature of a member or authorized epresentative of a member
	MANUEL L. CRESPO, ESE.

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Filing Fee: \$25.00