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COVER LETTER

Division of Co			
	perties LLC		5
iobaleci.		ited Liability Company	
Γhe enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Edgardo Imar		
		Name of Person	
	Baven Properties LLC		
	Company	Firm/Company	
	2320 Hollywood Blvd.		
	***	Address	
	Hollywood, FL 33020		_
	_	City/State and Zip Code	
	edgardoimar@yahoo.com	to be used for future annual report no	titiontion)
For further information	concerning this matter, please concerning this matter.	·	uncauon)
	concerning this matter, preuse of		
Edgardo Imar		773 4914795 at ()	
Name	of Person	Area Code Daytii	ne 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

Baven Properties LLC			
(<u>Name of the Lim</u>	ited Liability Company (A Florida Limited Lia	as it now appears on our records.) bility Company)	· · · · · · · · · · · · · · · · · · ·
The Articles of Organization for this Limited I	Liability Company w	ere filed on <u>02/14/2012</u>	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liabili	ty company here:	
The new name must be distinguishable and contain the	words "Limited Liability	Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
Principal office address MUST BE A STRE	ET ADDRESS)		
	-		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE	E BOX)		
			5 (5 M)
			And the second supplying
B. If amending the registered agent and registered agent and/or the new registered of		ce address on our records,	
egistered agent and/or the new registered to	mee address here.		
Name of New Registered Agent:	Edgardo Imar		
New Registered Office Address:	2320 Holiywood I		S: 02
-		Enter Florida street address	
	Hollywood	171 •	33020

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

Zip Code

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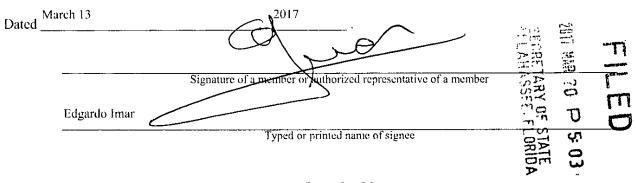
If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member **Type of Action Address** Title Name □ Add □ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add □ Remove ☐ Change _□ Add □ Remove ☐ Change ☐ Add □ Change Remove •, • _□ Change

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	he date of filing:	rior to date of filing or mor	(option	al)

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.



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Filing Fee: \$25.00