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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE DEALTY OF CHECKILLO

	DEAULI OF GREEF				
(Name of the Limit	ed Liability Company: (A Florida Limited Liab	<u>as it now appears on c</u> ality Company)	our records.)		
The Articles of Organization for this Limited L Florida document number <u>L12000036453</u>	iability Company we	ere filed on 03/15/20	012	_ and assig	ned
This amendment is submitted to amend the following	owing:				
A. If amending name, enter the new name o	f the limited liabilit	y company here:			
The new name must be distinguishable and contain the w	vords "Limited Liability	Company," the designa	ation "LLC" or the abbre	viation "L.L.	C."
Enter new principal offices address, if applic	:able:	<del></del>			<del></del>
(Principal office address MUST BE A STREE	ET ADDRESS)	· · · · · · · · · · · · · · · · · · ·			<del></del>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	- BOX)			18 03 0 2	To the second se
B. If amending the registered agent and registered agent and/or the new registered of	or registered offic	e address on our	records, enter th	e name of	the snew
Together and the state of the s				:	(2) ¥
Name of New Registered Agent:	DORIS GERMA	N			···
New Registered Office Address:	18111 NW 68TH	AVE APT H210			
new registered Office Address.	<del></del>	Enter Florida st	reet address		
	HIALEAH		, Florida <sup>33015</sup>	3-3939	
		City		Zip Code	<del></del>

## 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
MGRM	DORIS GERMAN	18111 NW 68TH AVE HIALEAH FL 33015-3939	<b>■</b> Add
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1	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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	12/01/2018
Note: If the	te, if other than the date of filing:  ate 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) date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ffective date on the Department of State's records.
If the record s (b) The 90th	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: day after the record is filed.
Dated	<u>nec 7</u> . 2018 .
	Signature of a member or authorized representative of a member
1	DORIS GERMAN
- <del>-</del>	Typed or printed name of signee

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Filing Fee: \$25.00