## L12000056202

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400328398194

05/02/19--01024--019 \*\*25.00

19 MAY -2 PH 6: 16

MAY 14 2019 S. YOUNG

## **COVER LETTER**

Division of Corporations			
SUBJECT:			
The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:			
LEON WILDSTEIN Name of Person			
WILDSTEIN INVESTMENTS, INC.			
9999 COUINS AVE. SUITE 19H			
BAL HARBOUR FL 33154  City/State and Zip Code  LEON W 1 (22 @ GMA) L. COM  E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
LEON WILDSTEIN at (514) 574 · 3302  Name of Person at (514) Daytime Telephone Number			
Enclosed is a check for the following amount:  \$25.00 Filing Fee \$\Bigcup \text{S30.00 Filing Fee & Certificate of Status}\$  \$\Bigcup \text{S55.00 Filing Fee & Certified Copy (additional copy is enclosed)}\$  \$\Bigcup \text{S60.00 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

O	F
(Name of the Limited Liability Compa (A Florida Limited I	
The Articles of Organization for this Limited Liability Company Florida document number <u>L.J.20005</u> 6203	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil  Enter new principal offices address, if applicable:	lity Company," the designation "L.L.C." or the abbreviation "L.L.C."
(Principal office address MUST BE A STREET ADDRESS)	SUITE 19H
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	
Name of New Registered Agent: LEO	4 WILDSTEIN
New Registered Office Address:	Enter Florida street address
BALHA	ARBOUR Florida 33154 Zip Code

## 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

Page 1 of 3

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>	Address	Type of Action
MGR	ERIC SHEPPARD	12000 BISCANNE BLUE	<u>).</u> □ Add
		SUITE 508	Remove
		MIAMI, FL 33181	Change
MGR	LEON WILDSTEIN	9999 COLLINS AVE	E. Xadd
		SUITE 19H	Remove
		BALHARBOUR, FL 3315	54□ Change
	<del></del>	<del></del>	Add
			□ Remove
			Change
			Add
			Remove
		<del> </del>	Change
<del></del>			
			□ Remove
			Change
		<u> </u>	Add
			□ Remove
			☐ Change

). If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
<del>.</del>	
_	
_	
_	
_	
_	
_	
_	
_	
_	
_	
_	
(If an effe Note:	we date, if other than the date of filing: 5.1.2019 (optional) (ctive 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)(but the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated_	May 13+ 2019.
	Signature of a member of authorized representative of a member
	LEON WILDSTEIN Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00