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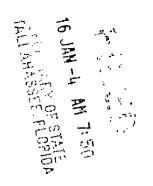
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Office Use Only



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COVER LETTER

	Division of Co	orporations					
SU	Ferretti 22 BJECT:						
Name of Limited Liability Company							
The	e enclosed Articles o	f Amendment and fee(s) are subm	nitted for filing.				
Ple	ase return all corresp	ondence concerning this matter t	to the following:				
		Angelo Martin		•			
			Name of Person				
		Fears Nachawati, PLLC					
		,	Firm/Company	• ,			
4925 Greenville Ave., Suite 715							
			Address				
		Dallas, TX 75206					
City/State and Zip Code amartin@fnlawfirm.com							
For	r further information	concerning this matter, please ca	11:				
Aı	ngelo Martin		214 461-6223 at()_				
Name of Person at ()							
En	closed 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:

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

Ferretti 225, LLC						
(Name of the Limi	ted Liability Compa (A Florida Limited I	ny as it now appears on our record Liability Company)	<u>s.</u>)			
The Articles of Organization for this Limited L Florida document number L12000070351	and assigned					
his amendment is submitted to amend the following	lowing:					
A. If amending name, enter the new name of	of the limited liab	ility company here:				
The new name must be distinguishable and contain the	vords "Limited Liabil	lity Company," the designation "LLC	or the abbreviation "L.L.C."			
Enter new principal offices address, if appli		2001 NW 139th Terrace				
Principal office address MUST BE A STREE		Pembroke Pines, FL 33028	The same			
Enter new mailing address, if applicable:		2001 NW 139th Terrace	SEC. 17.5			
(Mailing address MAY BE A POST OFFICE BOX)		Pembroke Pines, FL 33028	第5			
3. If amending the registered agent and egistered agent and/or the new registered o	~		s, enter the name of the n			
Name of New Registered Agent:	Steve Stenmark	C				
New Registered Office Address:	2001 NW 139t					
		Enter Florida street address				
	Pembroke Pine	s, Fl	orida <u>33028</u>			
		City	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

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	<u>Address</u>	Type of Action
MGR ·	Robert K. Vollrath	128 Island Drive South	□ Add
		Ocean Ridge, FL 33435	■ Remove
			Change
MGR	Anthony Rolon	2001 Hollywood Boulevard	∃ Add
		Suite 301	□ Remove
		Hollywood, FL 33020	Change
	·	_	Add
			□ Remove
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ffective of an effective	late, if other e date is listed, th	than the date one date must be special	f filing: cific and ca	nnot be prior (o date of filing	or more than 90	(option days after fi	(al) ling.) Pursuant to (505.0207
Note: If the locument's	e date inserted s effective date	in this block doe on the Departme	es not mee ent of Stat	et the applicate's records.	ble statutory t	iling requiren	ents, this d	ate will not be I	isted as
	16				,		12.01		ulia a a
		delayed effect the record is		e, but not	an errectiv	e time, at	12:01 a.	n. on the ea	riier o
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Page 3 of 3

Filing Fee: \$25.00

Typed or printed name of signee