

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000197124 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : AKERMAN LLP - MIAMI

Account Number : 075471001363 Phone

Fax Number

: (305)374-5600 : (305)374-5095

\*\*Enter the email address for this business entity to be used for er the email address for this pusiness energy and address please.

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN THE NEW ROK, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$55.00

Electronic Filing Menu

Corporate Filing Menu

Help

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H18000197124 3)))

mpany as it now appears on our records. ited Liability Company)	<del></del>
ited Liability Company)	)
any were filed on 10/04/2012	and assigned
liability company here:	
Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
5)	<u> </u>
	THE REST
d office address on our records, <u>here</u> :	enter the name of the
Enter Florida street address	
Flor	rida
City	Zip Code
1	d office address on our records, here:  Enter Florida street address , Flo

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

## 2018/07/05 17:40:50 3 /4

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 = M $AMBR = M$	lanager authorized Member	(((H18000197124 3)))	
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Azer, Moshe	767 ARTHUR GODFREY ROAD	
		MIAMI BEACH, FL 33140	■ Remove
			Change
MGR	Romain Zago	235 Lincoln Road, Suite 305	■ Add
		Miami Beach, FL 33139	Remove
			☐ Change
			☐ Remove
	•		Change
~ <del></del>			Add T
			Tin Change
			ORIDA
			Remove
			☐ Change

\_\_\_\_\_O Change

\_\_\_\_\_ Remove

## 2018/07/05 17:40:50 4 /4

				<del></del>
	·			
<del></del>				
			_	· 🔥 🕏
	· · · · · · · · · · · · · · · · · · ·		7	Ta La
<u> </u>				翌らこ
			- <u></u> -	55, 6
				四年 至
				1000
				- Br. 5
				· · · · · · · · · · · · · · · · · · ·
	· 			
ation district ordinary Alexander	d-4- of 6314ma.		(options	,n
ective date, if other than the effective date is listed, the date mus	at be specific and cannot be	prior to date of filing or mo	re than 90 days after fili	ng ) Pursuant to 605.0207
e: If the date inserted in this blument's effective date on the D	ock does not ineet the ap epartment of State's rec	ords.	requirements, this da	ite will not be listed as
record specifies a delayed	d effective date, but	t not an effective ti	me, at 12:01 a.m	i. on the earlier of
he 90th day after the rec	ord is filed.			
July 5	2018			
ed July 5		<u></u>		
• • • • • • • • • • • • • • • • • • • •	Signature of Thursbur or	authorized representative of	fa receber	

Page 3 of 3

Filing Fee: \$25.00