<u>U13000003729</u>

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

Office Use Only



000263670860

09/12/14--01023--001 **1660.00

SECRETARY OF STATE OALLAHASSEE FINAIR

SEP 17 2014 T CLINE

COVER LETTER

	egistration Section ivision of Corporations	
SUBJECT	. 10224 5	SW 180 ST, LLC
·	· · · · · · · · · · · · · · · · · · ·	mited Liability Company
The enclose	sed Articles of Amendment and fee(s) are so	ubmitted for filing.
Please reti	irn all correspondence concerning this matter	er to the following:
	·	Cormon Fonogo
	<u></u>	Carmen Fanego Name of Person
	•	
		TotalBank
		Firm/Company
	. 100	SE 2nd Street, 32nd Floor
		Address SS 7
	City/State and Zip Code	
	C	Miami, FL 33131 City/State and Zip Code Sfanego@totalbank.com
	E-mail address:	: (to be used for future annual report notification)
For furthe	r information concerning this matter, please	e call:
	Carmen Fanego	at (305) 476-6269
	Name of Person	Area Code & Daytime Telephone Number
	•	
Enclosed	s a check for the following amount:	
\$25.00	Filing Fee \$30.00 Filing Fee.& Certificate of Status	S55.00 Filing Fee & S60.00 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

(<u>Name of the Limited</u> (A	0224 SW 1	80 ST, LLC ny as it now appears	on our records.)	(A)	
(A	Florida Limited L	Liability Company)		28 SE	
The Articles of Organization for this Limited Li	ability Company	were filed on	01/08/2013	and assigned	
Florida document numberL13000003	3729			DATE DATE	
This amendment is submitted to amend the following	owing:				
A. If amending name, enter the new name of	the limited liab	ility company here	;	•	
					_
The new name must be distinguishable and end wit "L.L.C."	h the words "Limi	ited Liability Compan	y," the designation "L	LC" or the abbreviati	on
Enter new principal offices address, if applicable:		100 SE 2nd St	reet, 32nd Floor		
(Principal office address MUST BE A STREET ADDRESS)		Miami, FL 331	131		
·		 			-
Enter new mailing address, if applicable:		100 SE 2nd St	reet, 32nd Floor		_
(Mailing address MAY BE A POST OFFICE	BOX)	Miami, FL 331	131		-
					-
B. If amending the registered agent and/			ır records, <u>enter tl</u>	ne name of the ne	<u>•w</u>
registered agent and/or the new registered of	<u>fice address her</u>	<u>'e</u> :			
Name of New Registered Agent:			·		
New Registered Office Address:	100 SE 2nd Street, 32nd Floor				
		Enter Florida street address			•
		Miami	, Florida	33131	
·		City		Zip Code	•
New Registered Agent's Signature, if changing I	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 608 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

<u> Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
		,	
			Add Remove
			Remove
		•	IN I
		<u> </u>	SE da so
			ikemove
			1885 1885 1887 1887
			Add ⊋
•			Rémove :
			Add
	•		Remove
			_
			Add
<u></u>			Remove
. If amen	iding any other information, e	nter change(s) here: (Attach additional sheets, if necessary.)	
<u>N</u>	lew address for all MGRs:		,
1	00 SE 2nd Street, 32nd Flo	oor	
			<u> </u>
<u>N</u>	1iami, FL 33131		_
_			_
ated	August 12		
	n		
	Signature	of a member or authorized representative of a member	
	Signature ((//	
		Carmen Fanegŏ Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00