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WALK IN

ζ	CERTIFIED COPY	
	РНОТОСОРУ	
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C	FILING	AMEND
	817 Lyndall Lane, LI	
(0	CORPORATE NAME AND DOCUM	ENT#)
(0	CORPORATE NAME AND DOCUM	ENT#)
(0	CORPORATE NAME AND DOCUM	ENT#)
((CORPORATE NAME AND DOCUM	ENT#)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

8817 LYNDAL			
(Name of the Limited Limited (A Florida Limited)	any as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company lorida document number L13000039421	were filed on March 14, 2013 and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."		
Inter new principal offices address, if applicable:	160 Chubb Avenue		
Principal office address MUST BE A STREET ADDRESS)	RESS) Suite 206		
	Lyndhurst, NJ 07071		
nter new mailing address, if applicable:	160 Chubb Avenue		
Malling address MAY BE A POST OFFICE BOX)	Suite 206		
	Lyndhurst, NJ 07071		
. If amending the registered agent and/or registered of egistered agent and/or the new registered office address here. Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	, Florida		
	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

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
MGRM	Adam J. Schreiber	7444 Long Avenue	
		Skokie, IL 60077	■ Rcmove
			□ Change
MGR	Robert Cucuel	160 Chubb Avenue	
		Suite 206	☐ Remove
		Lyndhurst, NJ 07071	☐ Change
MGR	Kylc Wescoat	160 Chubb Avenue	= Add
		Suite 206	☐ Remove
		Lyndhurst, NJ 07071	Change
MGR Chris	Chris Diamond	160 Chubb Avenue	■ Add
Semante especial & medition per the		Suite 206	☐ Remove
		Lyndhurst, NJ 07071	☐ Change
MGR	Batya B. Klein	7444 Long Avenue	□ Add
		Skokie, IL 60077	■ Remove
			□ Change.
MGR	Paresh Vipani	7444 Long Avenue	Add E
		Skokie, IL 60077	Remove
			Change o

D. If amending any other info	ormation, criter change	(s) here: (Attach add	itional sheets, if necesso	rry.)	
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. Effective date, if other than	the date of filing. Upon	ı Filing	(antianal)		
Effective date, if other than (If an effective date is listed, the date Note: If the date inserted in thi document's effective date on the	s block does not meet the	applicable statutory fili	nore than 90 days after filing ng requirements, this date	.) Pursuant to 605,020 will not be listed as	7 (3)(b) s the
the record specifies a dela) The 90th day after the	yed effective date, b record is filed.	ut not an effective	time, at 12:01 a.m.	on the earlier o	f:
Dated March 16	, 2017				
✓	Signature and member of	or authorized representative	of a member	<u> </u>	
·		Kyle Wescoat			
	Typed o	r printed name of signee			
		Page 3 of 3		ARY O	ED
	Filli	ng Fee: \$25.00		A 4 34 OF STATE OF LORIDA	O
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