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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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SR CEVIC	HE, LLC	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our reco	rds.)
(A) Torrain Chinaga L	madinity Company)	(E.C.)
The Articles of Organization for this Limited Liability Company	were filed on MAY 13, 20	and assigned
Florida document number L13000069895	(
This amendment is submitted to amend the following:		
ting amendment is anothined 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 end with the words "Limi"1.,L.C."	ted Liability Company," the desig	nation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	2086 N UNIVERSITY DR	
(Principal office address MUST BE A STREET ADDRESS)	PEMBROKE PINES, FI	L 33024
		_
Enter new mailing address, if applicable:	2086 N UNIVERSITY	DR
(Mailing address MAY BE A POST OFFICE BOX)	PEMBROKE PINES, FI	L 33024
B. If amending the registered agent and/or registered of	lice address on our records	anter the name of the new
registered agent and/or the new registered office address her	e:	enter the name of the new
	_	
Name of New Registered Agent:		
New Registered Office Address:	_	
	Enter Florida street address	
	Flo	rida
	City , F10	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 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

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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:				
		ved trom our records:	Type of Action	
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D. If ar	nending any other informa	tion, enter change(s) here: (Attach addition	
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Dated _	JUNE 27		- Jan
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	Sig	nature of a member or authorized representativ	e of a member
		Typed or printed name of signee	
		Page 3 of 3	

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