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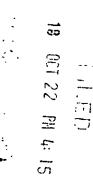
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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Certified Copies Certificates of Status
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Special Instructions to Filing Officer:

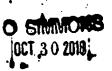
Office Use Only



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COVER LETTER

Division of Cor	rporations					
	IVESTMENTS, LLC					
SUBJECT:	Name of Lin	nited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
	THAMARA PEREZ					
		Name of Person	<u>. </u>			
	TABADESA ASSOCIAT	ES INC				
Firm/Company						
	419 W 49 ST STE 111					
	· <u> </u>	Address				
	HIALEAH, FL 33012					
		City/State and Zip Code				
	TAMMYP@TABADESA.	COM to be used for future annual report notif	· · · · · · · · · · · · · · · · · · ·			
For further information c	oncerning this matter, please c	•	ication)			
THAMARA PEREZ		305 558-0622				
Name o	f Person	at () Area Code Daytime	Telephone Number			
Enclosed is a check for the	ne 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

PLATA INVESTMENTS, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 05/24/2013 _____ and assigned Florida document number L13000076250 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

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>	<u>Name</u>	Address	Type of Action
MGR	FLORIDA HOLDINGS AND INVESTMENTS LLC	5315 ALTON ROAD	
		MIAMI BEACH, FL 33140	■ Remove
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E. Effective date, if other than the date of filing:		2.50	(optional)		
(If an effective date is listed, the date must be specific and canno Note: If the date inserted in this block does not meet the	he applicable sta	of filing or more than atutory filing requir	90 days after filing.) I ements, this date w	'ursuant to 605 ill not be list	i.020 ed a:
document's effective date on the Department of State's	s records.				
If the record specifies a delayed effective date, (b) The 90th day after the record is filed.	but not an e	effective time, a	t 12:01 a.m. o	n the earlie	er o
Dated October 2 201	18				
	Z .				
	9				

Page 3 of 3

Filing Fee: \$25.00

Typed or printed name of signee