43000094768

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	ısiness Entity Nar	me)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



800248955778

07/05/13--01001--007 **55.00

DEPARTMENT OF STATE

13 JUL -3 M I: 53

CORPORATE ACCESS,	When you need ACCESS to the world"
\ INC. /	236 East 6th Avenue . Tallahassee, Florida 32303 37066 (32315-7066) (850) 222-2666 or (800) 969-1666 . Fax (850) 222-2666
V	WALK IN
P	TCK UP: //3 Almila
CERTIFIED COPY	
☐ PHOTOCOPY ☐ CUS	
☐ COS FILING	LLC Amend
1. SIS Pen (CORPORATE NAME AND E	DOCUMENT #)
(CORPORATE NAME AND E	
6. (CORPORATE NAME AND D	
6. (CORPORATE NAME AND D	OCUMENT #)
SPECIAL INSTRUCTIONS:	Georgéo sunholdings.com

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

818 Penn LLC		
(Name of the Limited Liabilit	y Company as it now appears on o	ur records.)
(A Florida	Limited Liability Company)	74 604 A
The Articles of Organization for this Limited Liability	Company were filed on 7-2-13	and assigned
Florida document number L13000094768		
	<u> </u>	SSEE MO
This amendment is submitted to amend the following:		- 5
A. If amending name, enter the new name of the lin	nited liability company here:	
		3>
The new name must be distinguishable and end with the we "L.L.C."	ords "Limited Liability Company," th	e designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		<u> </u>
B. If amending the registered agent and/or regis	etared office address on our re	poords enter the name of the new
registered agent and/or the new registered office add		cords, enter the hame of the nev
regimered agent analyst the new registered office ad-	areso nere.	
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Flo	prida street address
	Zinei Tie	
		, 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 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Ryan Schatzle	818 Pennsylvania Ave	Add
		Apt 5 Miami Beach, FL	Remove
		33139	
MGR	Ryan Schatzle	818 Pennsylvania Ave	Add
		Apt 5 Miami Beach, FL	Remove
		33139	
MGR	Euro Vulture Fund	PO Box 876	Add
		Miami Beach, FL	Remove
		33139	
MEMBER	Euro Vulture Fund	PO Box 876	Add
		Miami Beach, FL	Remove
		33139	
			Add
			Remove
		्रा इत	3 7
			ed Add
			Remove

If amending any other informa	tion, enter change(s) here: (Attach additional sheets, if necessary.)
	· ·
_{ed} July 3,	
Sig	nature of a member or authorized representative of a member
Ryan Schatzle	
- 100	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

18 JUL -3 PM

13 JUL -3 PM 1:54