L13000145233

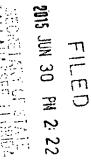
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COVER LETTER

TO: **Registration Section Division of Corporations**

MAMAPI SUBJECT:	FLORIDE LLC				
SUBJECT.	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspondent	ondence concerning this matter	to the following:			
	Ahpaly Coradin, Esq.				
	· · · · · · · · · · · · · · · · · · ·	Name of Person			
	Coradin Law P. A.				
	**************************************	Firm/Company	· · · · · · · · · · · · · · · · · · ·		
	200 South Biscayne Blvd,	Suite 2790			
	Address				
	Miami, FL 33131				
		City/State and Zip Code			
	ahpaly@coradinlaw.com				
	E-mail address: (to be used for future annual report notific	cation)		
For further information c	oncerning this matter, please ca	all:			
Ahpaly Coradin		305 714 9532			
Name o	f Person		Telephone Number		
Enclosed is a check for the	he following amount:				
■ \$25.00 Filing Fee	□ \$30.00 Filing Fce & 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:

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

TO ARTICLES OF ORGANIZATION OF

FILED 2015 JUN 30 PM 2: 22

SECRETARY OF STATE-TALL, AMASSES, FLORIDA

MAMAPI FLORIDE LLC			
(Name of the Lim	Ited Liability Compa (A Florida Limited	any as it now appears o Liability Company)	n our records.)
The Articles of Organization for this Limited I. Florida document number L13000145233	Liability Company	were filed on 10/15	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liab	pility company here	:
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the desi	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	160 W. CAMINO REAL	
(Principal office address MUST BE A STRE		SUITE 286	
<u> </u>		BOCA RATON, F	L 33432
Enter new mailing address, if applicable:		160 W. CAMINO REAL	
(Mailing address MAY BE A POST OFFICE	(BOX)	SUITE 286	
		BOCA RATON, FL 33432	
registered agent and/or the new registered of New Registered Agent:		WEINSTEIN, Esq.	
New Registered Office Address:	3100 SOUTH	FEDERAL HIGHWA	Y, SUITE B
Trom Traganessa Office Fladicise.	Enter Florida street address		
	DELRAY BEA	ACH	, Florida
		City	Zip Code
New Registered Agent's Signature, if changing I hereby accept the appointment as register		_	pacity. I further agree to comply with th
provisions of all statutes relative to the pro- accept the obligations of my position as reg being filed to merely reflect a change in the company has been notified in writing of this	per and complete gistered agent as e registered office s change.	e performance of m provided for in Ch e addr ess, I hereby	y duties, and I am familiar with and apter 605, F.S. Or, if this document is

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Coradin Law P. A.	200 South Biscayne Blvd	Add
		Suite 2790	. Remove
		Miami, FL 33131	Character Character
MGR Sparing Partners Inc.	Sparing Partners Inc.	160 W. CAMINO REAL	Add
		SUITE 286	□ Domosio
		BOCA RATON, FL 33432	Change.
	Miles and the second of the se		
			□ Remove
			☐ Change
			□ Add
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			□ Change

Page 3 of 3

Filing Fee: \$25.00