213000168328

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(Address)
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(City/State/Zip/Phone #)
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2017 AUG = 7 PM 4: 02

K. SALY AUG - 9 2017

COVER LETTER

Division of Co	rporations		
OVERVIE Subject:	W 1901 LLC		
-	Name of Lim	ited Liability Company	
The enclosed Articles of	`Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Sophie Malaquin		
		Name of Person	
		Firm/Company	
	1330 West Avenue, Apt 19	ин	
•		Address	
	Miami Beach, Florida 331,	39	
	somalaquin@gmail.com	City/State and Zip Code	
	E-mail address: (to be used for future annual report notif	ication)
For further information (concerning this matter, please co	all:	
Sophic Malaquin		at () Area Code — Daytime	
Name (of Person	Area Code Daytime	: Felephone Number
Enclosed is a check for t	he 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: 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

2017 AUG - 7 PM 4: 03
PALLAHASSES, FLORIO.

Overview 1901 LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

I hereby accept the appointment as registered agent as provisions of all statutes relative to the proper and con accept the obligations of my position as registered ago being filed to merely reflect a change in the registered company has been notified in writing of this change.	mplete performance of n ent as provided for in Cl	ny duties, and I am familiar with and napter 605, F.S. Or, if this document is	
New Registered Agent's Signature, if changing Registered	Agent:		
		, Florida Zip Code	
		. Florida	
New Registered Office Attribus.	Enter Florida street address		
New Registered Office Address:			
B. If amending the registered agent and/or registered agent and/or the new registered office addressed agent and/or the new registered office addressed Name of New Registered Agent:		our records, <u>enter the name of the ne</u> y	
(Mailing address MAY BE A POST OFFICE BOX)			
Enter new mailing address, if applicable:			
(Principal office address MUST BE A STREET ADDRI	<u>ESS)</u>		
Enter new principal offices address, if applicable:			
The new name must be distinguishable and contain the words "Limite	ted Liability Company," the des	signation "LLC" or the abbreviation "L.L.C."	
A. If amending name, enter the new name of the limit	ed liability company her	<u>e</u> :	
This amendment is submitted to amend the following:			
	_·		
The Articles of Organization for this Limited Liability Co Florida document number L13000168328	ompany were filed on 12 o	and assigned	

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	Caroline Malaquin	1330 West Avenue	
		Apt 1901	☐ Remove
		Miami Beach, Florida 33139	Change
			Add
			☐ Remove
			Zinge T
			Remove C
			Change
			□ Add
			☐ Remove
			☐ Change
			
			☐ Remove
			Change
			Add □ Remove
			Change

		 	
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ective date, if other than the coffective date is listed, the date m	ist be specific and camiot be pr	or to date of filing or more than 90	(optional) days after filing.) Porsuam to 605.0207
(te: If the date inserted in this becament's effective date on the l			nents, this date will not be listed as
	•		
record specifies a delaye The 90th day after the re		not an effective time, at	12:01 a.m. on the earlier of
ted July 26	2017		
	·	1 .	
ted Huly 26		 1_ `	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00