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COVER LETTER

	gistration S ision of Co			
SUB IE CE.	SOUTH E	BAY ONE LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	1 Articles of	Amendment and fee(s) are sub	mitted for filing	
		ondence concerning this matter	2	
		Jay Reddy		
			Name of Person	
		SOUTH BAY ONE LLC		
			Firm/Company	
		3450 Windmill Ranch Rd		
			Address	•
		Weston, FL 33331		
		jayreddyfl@gmail.com	City/State and Zip Code	
			to be used for future annual report i	notification)
For further in	nformation o	concerning this matter, please c	all:	
Jay Reddy			954 654-2704 at ()	1
	Name c	of Person	Area Code Day	time Telephone Number
Er closed is a	a check for t	he following amount:		
■ \$25.00 j ²	iling Fee	□ \$30.00 Filing Fee & Cer:ificate 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)
	Registi Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COU Registration Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations 3 Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SOUTH BAY ONE 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 Com	pany were filed on <u>11/22/2013</u>	and assigned
Florida document number L13000174727		

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 Liabili	ty Company," the designation "LLC" or the abbreviation "LalC."	
Enter new principal offices address, if applicable:		1
(Frincipal office address MUST BE A STREET ADDRESS)	<u> </u>	
	3	11
		0
Enter new mailing address, if applicable:	<u></u>	
(Mailing a tdress 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:	Suneetha Reddy	
New Registered Office Address:	Enter Florida street ad	ldress
	Cit?	Florida

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.

If Changing Registered Agent, Signature of New Registers

Page 1 of 3

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added or <u>removed from our records</u>:

MGR = |V|anager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			D Add
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			Remove
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			Remove
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			— 🖾 Add
			Remove
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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If

Effective date, if other than the date of filing:		· · ·					
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Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00