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SPIEGEL AND UTRERA

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Division of Corporations

Florida Department of State
Division of Corporations
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Fax Number : (850) 617-6383

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Account Name : SPIEGEL & UTRERA, P.A.
Account Number : FCA000000001
Phone : (305) 954-6000
Fax Number : (305) 960-2076

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Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
LIVENGOOD PARK LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

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TALLAHASSEE, FLORIDA

S. WARREN

JUN 15 2017

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Livengood Park 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 12/31/2013 and assigned
Florida document number L14000000021.

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:

Harsh Arora, Esq.

New Registered Office Address:

Spiegel & Utrera, P.A., 1840 Coral Way

Enter Florida street address

Miami

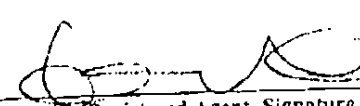
Florida 33145

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 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 Registered Agent

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

E. Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated

06/14/17

Signature of a member or authorized representative of a member

Fanny Espinal

Typed or printed name of signee

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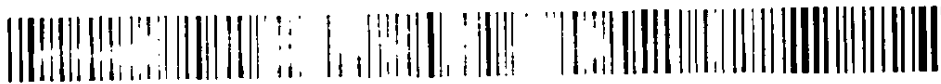
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Address: - 101 101-0081
Fax: - 101 616-0900

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annual registration. Enter an email address please.***

Email Address: lucy@lucy.com

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Division of Corporations

SUBJECT: _____

The enclosed Articles of Amendment have been filed for filing.

Please return all correspondence concerning this filing to:

ELIANA DIAZ

RICHARD J. DIAZ

2665 S. W. 11th Ave.

MIAMI, FLORIDA 33135

2013-2014

(For notification)

For further information concerning:

ELIANA DIAZ

Name of Person

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Days of Telephone Number

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Division of Corporations
P.O. Box 6327
Tallahassee, FL 32306

FOR COURIER ADDRESS:
Section
Corporations
Filing
Division Office
FL 32306

MENT

ARTICLE OF ORGANIZATION

_____ (Print or type name of entity)
 _____ (Print or type address of entity)
 _____ (Print or type city and state of entity)

The Articles of Organization for _____
 Florida document number _____

_____ of 03/2016 and assigned

This amendment is submitted to _____

A. If amending name, enter the new name of

The new name must be distinguishable from _____

_____ the designation "LLC" or the abbreviation "L.L.C."

Enter new principal office address, if applicable
 (Principal office address MUST BE A PHYSICAL ADDRESS)

Enter new mailing address, if applicable
 (Mailing address MAY BE A PO BOX)

B. If amending the registered agent and/or the new registered agent and/or the new agent

_____ on our records, enter the name of the new

Name of New Registered Agent

New Registered Agent

New Registered Agent's Signature

*I hereby accept the appointment
 provisions of all statutes relating to
 accept the obligations of my position
 being filed to merely reflect a change
 company has been notified.*

*this capacity. I further agree to comply with the
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 in Chapter 605, F.S. Or, if this document is
 hereby, I agree that the limited liability*

_____ Signature of New Registered Agent

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