## \*L14000067447

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K.SALY EXAMINER JUN 26 2014

SUN 357 Requi	Address  OSIO Phone #	5454	
	•	and the contract	
		·	Office Use Only
CORPORATION	name(9) & docu	ivent number(s), (	if known):
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Walk in	Pick up time		Certified Copy
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<u>NEW FILINGS</u>		<u>AMENDMENTS</u>	
Profit		Amendment	
Wot for Profi		Resignation of	R.A. Officer/Director
Limited Liab Domestication		☐ Change of Reg ☐ Dissolution/W	
Other	511	☐ Merger	a Copy and and Copy
<u>Other filin</u>	<u>G3</u>	REGISTRATION	/OUALIFICATION
C Annual Rep C Fictitious N		Foreign Limited Partne Reinstatement Trademark Other	
			Examiner's Initials

CRIE031(7/97)

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Dade Plaza North, LLC

company has been notified in writing of this change.

(Name of the Limited Liability Company as It now annears on our records.)
(A Florida 1 inited I tability Company)

The Articles of Organization for this Limited Liability Company	y were filed o	n Apri	1 24, 2014	and assign	ed
Florida document number L14000067447					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited lia	bility compa	<u>ny here</u> :	:		
The new name quist be distinguishable and end with the wirds "Limited Lie	dubty Company	," the desi	gnation "LLC" or	the abbreviation "L.I. C	ſ <u>'</u> ."
Enter new principal offices address, if applicable:				_ , . ,	
(Principal office address MUST BE A STREET ADDRESS)					
		•	, <u>.</u>		
Enter new mailing address, if applicable:					
(Mailing address MAY RE A POST OFFICE BOX)					
				\$ 10 mm and 10 mm	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address he  Name of New Registered Agent:	office addres <u>re</u> :	is on o	ur records, <u>en</u>	ter the name of	the new
			·		
New Registered Office Address:	Enter Florida street address				
	. Florida Zip Code				
- <del>11-21</del>	Cin			Zip Code	
New Registered Agent's Signature, if changing Registered Agent	<u>t:</u>				
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office	e performane provided for	ce of my r in Cha	duties, and Lapter 605, F.S.	im familiar with a Or, if this docume	ınd

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member Type of Action Title Name <u>Address</u> Olesia Ustaeva 18101 Collins Ave., Apt. 5006 **AMBR** 🖺 Add Sunny Isles Beach ☐ Remove FL 33160 Galina Ustaeva 18101 Collins Ave., Apt. 5006 **AMBR** 🖀 Add Sunny Isles Beach □ Remove FL 33160 ☐ Remove \_D vm □ Remove □ Add Remove

D. 1	If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)						
E. Effe	lective date, if other than the date of filing:		(optional)				
ſ	The effective date must be specific, cannot be pri the date this document is filed by the Florida De	or to date of receipt or filed date and cam: partment of State)	of be more than 90 days after				
	Dated June 17	2014					
	sont to we		Ging -				
	Signific	re of a member or multiorized representationized member; Galina Ust	nvol a nember aeva, as authorized member				
		amout are structural attainment of gammar					

Page 3 of 3

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