

L14000112965

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GUZMAN & GUZMAN PA

PAGE 01/04

5/24/2016

Division of Corporations

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

From:

Account Name : GUZMAN & GUZMAN, P.A.
Account Number : I20080000090
Phone : (305)670-1991
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
PARMA 55, LLC

Certificate of Status	0
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SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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2016 MAY 24 AM 9:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 25 2016

SWARTON

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

PARMA 55, 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 07/17/2014 and assigned
Florida document number L14000112965

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:

18800 NE 21ST AVE

(Principal office address MUST BE A STREET ADDRESS)

NORTH MIAMI BEACH, FL 33179

Enter new mailing address, if applicable:

18800 NE 21ST AVE

(Mailing address MAY BE A POST OFFICE BOX)

NORTH MIAMI BEACH, FL 33179

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:

GUZMAN & GUZMAN, P.A.

New Registered Office Address:

9130 S DADELAND BLVD, STE 1509

Enter Florida street address

MIAMI

Florida 33156

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.

(Signature)
If Changing Registered Agent, Signature of New Registered Agent

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>	<u>Address</u>	<u>Type of Action</u>
AR	S & A COMPANY MANAGEMEN	2875 NE 191ST STREET, SUITE 1	<input type="checkbox"/> Add
		AVENTURA, FL 33180	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	G & G MANAGEMENT US, LLC	9130 S. Dadeland Blvd. Suite 1509	<input checked="" type="checkbox"/> Add
		Miami, FL 33156	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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Dated MAY 24, 2016

Signature of a member or authorized representative of a member

Typed or printed name of signee

Page 3 of 3

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