215-05999-5:43:00 GMT) 786-599-2897 From: Moissel Froisn Division of Corporations Electronic Filing Cover Sheet
Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.
(((H15000200426 3)))
Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.
To: Division of Corporations Fax Number : (850)617-6383 From: Account Name : SNYDER GROISMAN P.A. Account Number : I20120000060 Phone : (786)899-2880 Fax Number : (786)899-2890 ***Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** Email Address:
LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WASHINGTON 234 DEVELOPMENT, LLC Certificate of Status Certified Copy Page Count Estimated Charge S25.00

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Page 4 of 7		2015-08-19 15:43:00 (GMT)	786-899-2890 From: Melissa Gro	ism
		COVER LETTER		
TO: Registration Se Division of Cor				
	TON 234 DEVELOPMENT,	UC		
SUBJECT:		nited Liebility Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
	ondence concerning this matter	-		
	MYLES MOCEGA		·	
		Name of Person		
	SNYDER GROISMAN P		- 196 Nya 1/2000-01/1/2/1/ 1000-01/201	
		Firm/Company		
	21500 BISCAYNE BLVE			
		Address		
	AVENTURA, FL 33180			
		City/State and Zip Code		
	MYLESØSNYDERGROU	SMANCOM		
	MYLES@SNYDERGROU E-mail address: (SMAN.COM (to be used for future annual report notific	ation)	
For further information c		to be used for future annual report notific	ation)	
For further information c MELISSA GROISMAN	E-mail address: (oncerning this matter, please c	(to be used for future annual report notific sall: 786 899-2880	ation)	
MELISSA GROISMAN	E-mail address: (oncerning this matter, please c	(to be used for future annual report notific all: 786 899-2880 at ()	ition)	
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MELISSA GROISMAN Name o	E-mail address: (oncerning this matter, please c f Person	(to be used for future annual report notific all: 786 899-2880 at ()		

39-2890 Fru. FILED 2015 AUG 19 AM D: 01 TAILAHASSEE. FLORIDA Page 5 of 7 To: 786-899-2890 From: Melissa Groisman 2015-08-19 15:43 00 (GMT) ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF WASHINGTON 234 DEVELOPMENT, 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 07/23/2014 and assigned Florida document number L14000116164 This amendment is submitted to amend the following: A. If smending 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 "LLC." 21500 HISCAYNB BLVD, SUITE 401 Enter new principal offices address, if applicable: AVENTURA, FL 33180 (Principal office address MUST BE A STREET ADDRESS) 21500 BISCAYNE BLVD. SUITE 401 Enter new mailing address, if applicable: AVENTURA, FL 33180 (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: New Registered Office Address: Enter Florida street address , Florida Ziv Code City 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

Page 1 of 3

To: Page 6 of 7

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2015-08-19 15:43.00 (GMT)

786-899-2890 From: Melissa Groisman

If amending Authorized Person(s) authorized to manage,	enter the title, name, ar	d address of each person	1 being added
or removed from our records:			

MGR = Manager

<u>Title</u>	Name	Address	Type of Action
MGR	CASANO, SEBASTIAN	21500 BISCAYNE BLVD.	🛛 Add
		SUITE 401	Remove
	,	AVENTURA, FL 33180	Change
			D Add
		— , ,	Remove
			Change
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			ALLORE CHANGE
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			Remove
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Page 7 of 7	2015-08-19 15:43:00 (GMT)	786-899-2890 From: Melissa Groisman
D. If amending any other information	n, enter change(s) here: <i>(Attuch additional shee</i>	zts, if necessary.)
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		ORDITE OF
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E. Effective date, if other than the date of tiling: _________(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	8/15/15
	he
	Signature of a member or authorized representative of a member McHissa Moisma, Authorized Agent
	Typed or plinted name of signee

Page 3	of 3
Filing Fee:	\$25.00

To: ¢