L14000122562

(Re	questor's Name)		
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SECRETARY OF STATE
TAIL ALLASSES FLORIDA

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ASSOULINE & BERLOWE THE BUSINESS LAW FIRM

3250 Mary Street, Suite 100 • Miami, Florida 33133 Telephone: 305-567-5576 • Facsimile: 305-567-9343 www.assoulineberlowe.com

November 13, 2014

· Via Federal Express

Department of State Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

RE: Articles of Amendment to Articles of Organization of

921 North 21st Court, LLC

Florida Document No.: L14000122562

Our Ref.: 02285.0005

Dear Sir or Madam:

Enclosed please find one Articles of Amendment to Articles of Organization for filing in connection with the above-referenced matter.

Also enclosed please find our firm's trust account check no. 17022 in the amount of \$30.00 for filing and returning a Certificate of Status in the enclosed self-addressed pre-paid Federal Express envelope.

Thank you in advance for your cooperation regarding this matter.

Sincerely,

Elizabeth Gil

Enclosures

COVER LETTER

	ision of Cor					
SUBJECT:	921 NOF	921 NORTH 21ST COURT, LLC				
SUBJECT		Name of Limi	ited Liability Company			
The	d Aminlon of	A wandward and Social and sub-	mitted for filing			
		Amendment and fee(s) are sub-	_			
Please return	n all correspo	ndence concerning this matter	to the following:			
•		ERIC N. ASSOULIN	E			
			Name of Person			
	ASSOULINE & BERLOWE, P.A.					
			Firm/Company			
	213 E. SHERIDAN STREET, SUITE 3					
			Address			
		FT. LAUDERDALE,	FL 33004			
			City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·		
		ENA@ASSOULINEE	BERLOWE.COM to be used for future annual report notif	Tootion)		
For further i	nformation c	oncerning this matter, please of		icationy		
Name of Person		954 929-1899at () Area Code Daytime Telephone Number				
	Name o	reison	Alea Code Dayunia	receptione (value)		
Enclosed is	a check for th	ne following amount:				
\$25.00	Filing Fee	■ \$30.00 Filing Fee & Certificate 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)		
	Registr	ING ADDRESS: ration Section	STREET/COURI Registration Section Division of Corpor	n		
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Ce				

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2014 NOV 14 PM 1: 31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(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 08/05/2014 and assigned Florida document number L14000122562
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
921 NORTH 21ST AVENUE, LLC
The new name must be distinguishable and end with 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:
New Registered Office Address: Enter Florida street address
Enter Prortau street address

New Registered Agent's Signature, if changing Registered Agent:

921 NORTH 21ST COURT, LLC

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Florida

Zip Code

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

<u> Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			□ Remove
<u> </u>			Add
			□ Remove
			Add
			Remove
			Add
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			Add
			Remove
			Add
			□ Remove

D. If amending any other information,	enter change(s) here: (Attach additional sheets, if necessary.)	
		nu-manan.
		- -
E. Effective date, if other than the date (The effective date must be specific, cannot be the date this document is filed by the Florida letters.)	prior to date of receipt or filed date and cannot be more than 90 days after	
Dated NOVEMBER 12	2014	
- Edding	ature of a member or authorized representative of a member	
ERIC N. ASSOULINE	·	
	typed of printed manie of signee	
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	Page 3 of 3	<u> </u>
	Filing Fee: \$25.00	NILED HASSEE, FL
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