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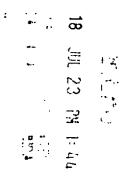
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COVER LETTER

	Registration Se Division of Cor			
eun uc		h CU8 LLC		
SUBJEC	,1:	Name of Lim	ited Liability Company	
The encle	osed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ndence concerning this matter	to the following:	
		Michael A. Beckish		
			Name of Person	
			Firm/Company	
		117 SW 10th Street Suite	101-63	
			Address	
		Miami, Fl. 33130		
		·	City/State and Zip Code	
		Mike.Beckish@gmail.com		
Con Comb	information as	E-mail address: (oncerning this matter, please of	to be used for future annual report notifi	cation)
	A Beckish	meering this matter, please of	24() 447-4184 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed	l is a check for th	e following amount:		
\$25.0	00 Filing Fce	□ \$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)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

South Beach CU8 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 09/08/2014 and assigned Florida document number $\frac{1.14000140482}{1.14000140482}$ 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 117 SW 10th Street Suite 101-63 Enter new principal offices address, if applicable: Miami, Florida 33130 (Principal office address MUST BE A STREET ADDRESS) 117 SW 10th Street Suite 101-63 Enter new mailing address, if applicable: Miami, Florida 33130 (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: Michael A Beckish Name of New Registered Agent: 117 SW 10th Street Suite 101-63 New Registered Office Address: Enter Florida street address

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.

Miami

If Changing Registered Agent, Signature of New Registered Agent

, Florida _33130

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>	Address	Type of Action
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Filing Fee: \$25.00