4000159659 Division of Corporations Florida Department of State

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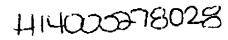
Electronic Filing Menu

Corporate Filing Menu

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NORTHERN CYPRESS LLC			
(Name of the Limited Li (A Fi	ability Company as it now appears on our records.) orida Linuted Liability Company)		
The Articles of Organization for this Limited Liability Florida document number L14000159659	ity Company were filed on October 10, 2014	and assigned	
This amendment is submitted to amend the following	g;		
A. If amending name, enter the new name of the	limited liability company here:		
The new name must be distinguishable and end with the word	s "Limited Lizbility Company," the designation "LLC" or	the abbreviation "L.L.C."	
Enter new principal offices address, if applicable	:		
(Principal office address MUST BE A STREET A	DDRESS)		
		14 I	-4
Enter new mailing address, if applicable:	A		41
(Mailing address MAY BE A POST OFFICE BOX			Entra Entra
B. If amending the registered agent and/or registered agent and/or the new registered office	egistered office address on our records, <u>er</u> address <u>here</u> :	rer the name of the new 25	
Name of New Registered Agent:	······································		
New Registered Office Address:	Enter Florida street address		
_	, Florid		
	City	Zip Code	
New Registered Agent's Signature, if chauging Regis	stered Agent:		
I hereby accept the appointment as registered as provisions of all statutes relative to the proper a accept the obligations of my position as registered being filed to merely reflect a change in the registerm and the property company has been notified in writing of this change.	nd complete performance of my duties, and l ed agent as provided for in Chapter 605, F.S. stered office address, I hereby confirm that th	am familiar with and Or, if this document is	

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

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:

AMBR = Authorized Member Type of Action <u>Address</u> <u>Title</u> <u>Name</u> **AMBR** Carlos O. Araya Rojas 4995 NW 72nd Ave. Suite 205 📕 Add Mlami, Florida 33166 ☐ Remove 4995 NW 72nd Ave. Suite 205 Miami, Florida 33166 AMBR Gonzalo E. Vejar Lobos _____ Add □ Remove __D Add __ Remove _□ Add __ D Add ____ D Remove □ Add ____ 🗀 Remove

Page 2 of 3

MGR = Manager

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he effective dute must be specific, cannot be prior to date of receipt or filed date and the date dis document is filed by the Florida Department of State) December 01 2014	(optional) suppose the properties of the suppose the s
the effective date must be specific, cannot be prior to date of receipt or filed date and the date this document is filed by the Florida Department of State) December 01 Qualification (C.L.)	annoi be more than 90 days after
iffective date, if other than the date of filing: be effective date must be specific, cannot be prior to date of receipt or filed date and the date this document is filed by the Florida Department of State) December 01 2014 Signature of a member or authorized representational department of a member of authorized representation of the date and the date of state and the date an	annoi be more than 90 days after

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SECRETARY OF STATE

<u>,</u>