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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 565 NE 53 ST, LLC

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November 24, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

565 NE 53 ST, LLC 2515 FLAMINGO DRIVE MIAMI BEACH, FL 33140US

SUBJECT: 565 NE 53 ST, LLC

REF: L14000166290

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You failed to make the correction(s) requested in our previous letter.

The effective date must be specific and cannot be prior to the date of filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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Jenna D Harris Regulatory Specialist II FAX Aud. #: H14000265652 Letter Number: 614A00024906 850-617-6381

11/17/2014 1:52:24 PM PAGE 1/001 Fax Server



November 17, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

565 NE 53 ST, LLC 2515 FLAMINGO DRIVE MIAMI BEACH, FL 33140US

SUBJECT: 565 NE 53 ST, LLC

REF: L14000166290

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet

The effective date must be specific and cannot be prior to the date of filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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Jenna D Harria Regulatory Specialist III FAX Aud. #: F14000265652 Teller Number: 614200024371

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(((H14000265652 3)))

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

565 NE 53 ST, LLC		•			
(Nume of the Limited Liability (A Florida)	y Company as it no Limited Liability C	ompany)	.)		
The Articles of Organization for this Limited Liability Co Florida document number L14000166290	ompany were file	ed on October 24, 20	014 an	d assigned	
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limit	ted liability con	pany here:			
The new name must be distinguishable and end with the words "Lim	nited Liability Comp	pany," the designation "LLC	" or the abbrevial	ion "L.L.G."	<del></del>
Enter new principal offices address, if applicable:				<u> </u>	<u> </u>
(Principal office address MUST BE A STREET ADDRI	ESS)			8 8	<u> </u>
				~ ~	17.7
				253	3-51
Enter new mailing address, if applicable:					1 -e;'='. 2-7/
(Mailing address MAY BE A POST OFFICE BOX)			. ' .' '		<u>-</u> ;
Internity data tass MAT DE AT OST OFFICE BOX			V	<del></del>	- Andrews
B. If amending the registered agent and/or registered agent and/or the new registered office addressed of New Registered Agent:		lress on our records	enter the na	ame of the	: new
New Registered Office Address:					
		Enter Florida street address			
		, Flo	rida		_
	City		Zip	Lode	
New Registered Agent's Signature, if changing Registered	Agent:				
I hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and co accept the obligations of my position as registered ag being filed to merely reflect a change in the registered company has been notified in writing of this change.	omplete perforn ent as provided	iance of my duties, an I for in Chapter 605, I	d I am familia F.S. Or, if this	ir with and document (	
	If Changing Rec	istered Agent, Signature o	New Registered	Agent	

(((H14000265652 3)))

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 AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Mariella Gonzalez	2515 Flamingo Drive	■ Add
		Miami Beach, FL 33140	□ Remove
			Add
			□ Remove
			□ Remove
- <del></del>			SECRETAR VENCHOF 1
			# ())
	******		
			Remove .
			□ Add
		***************************************	□ Remove

If amending any other information.	enter change(s) here; (Attach a	dditional sheets, if necessary.)
. Effective date, if other than the date (The effective date must be specific, cannot be	e of filing: prior to date of receipt or filed date and co	(optional) annot be more than 90 days after
the date this document is filed by the Florida		
Dated November 14	2014	
	<b>2</b>	
- C	untire of a member or authorized represen	ntative of a member
Nelatin Gunzalez		
<del></del>	Typed or printed name of sig	TICA

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