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## **COVER LETTER**

Division of Corp	orations							
SUBJECT: 8th Ave	enue Holdings. LL Name of Limit	ed Liability Company	<del></del>					
		nitted for filing						
The enclosed Articles of A	mendment and fee(s) are subm	nitted for timig.						
Please return all correspon	dence concerning this matter to	o the following:						
	John P. W	ilkes, Esq.						
		Name of Person						
	John P. W	ilkes, P.A.						
		Firm/Company						
	901 S. Fe	deral Highway, #101	Α					
		Address						
	Fort Laud	erdale, FL 33316						
		City/State and Zip Code						
	jwilkes@jpwpa.com							
	E-mail address: (t	to be used for future annual report notif	ication)					
For further information co	oncerning this matter, please ca	ill:						
John P.	Wilkes	(954 ) 467 93	0.0					
Name of		at ( <u>954</u> ) <u>467-92</u> Area Code Daytimo	: Telephone Number					
	6.11							
Enclosed is a check for th								
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55,00 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

TO:

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

8th Avenue Hold; ( <u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appears on our records,) ability Company)
The Articles of Organization for this Limited Liability Company version of the Company vers	were filed on and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	lity company here:
The new name must be distinguishable and contain the words "Limited Liability	ty Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1718 NE_26 Avenue
(Principal office address MUST BE A STREET ADDRESS)	Fort Lauderdale, FL 33305
Enter new mailing address, if applicable:	1718 NE 26 Avenue
(Mailing address MAY BE A POST OFFICE BOX)	Fort Lauderdale, FL 33305
Name of New Registered Agent:  New Registered Office Address:	Enter Florida street address  Florida  City  Florida  Florida  Florida  Florida  City
New Registered Office Address:  New Registered Agent's Signature, if changing Registered Agent:	Enter Florida street address Florida

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

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
MGR	John P. Wilkes, Esq.	901 S. Federal Highway #101A	EAdd
		Fort Lauderdale, FL 33316	Remove
			Change
MGR	Nicholas O'Bea	1718 NE 26 Avenue	Add
		Fort Lauderdale, FL 33305	Remove
			EChange
			Add
			<b></b> ■Remove
			[I]Change
			<b>I</b> E]Add
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