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From:

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Account Number : I20080000091

Phone : (954)202-9600

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **OSPREY 900 LLC**

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## **COVER LETTER**

	istration Sec ision of Corp						
SUBJECT:	Osprey 90	00 LLC					
		Name of Limit	red Liability Company	<del></del>			
The enclosed	l Anicles of A	Amendment and fee(s) are subi	nitted for filing.				
Please retur	i all correspor	ndence concerning this matter t	o the following:				
		Stewart H. Lapayowl	ker, Esq.				
		**************************************	Name of Person	<del></del>			
		Stewart H. Lapayowl	cer, P.A.				
			Firm/Company				
		5360 NW 20th Terra	ce Suite 205				
		Address					
		Fort Lauderdale, Flo	rida 33309				
			City/State and Zip Code				
		stewart.lapayowker@	•				
			to be used for future annual report notific	cation)			
For further	information co	oncerning this matter, please ca	111:				
Stewart I	ا. Lapayo	wker, Esq.	954 202-9600				
	Name of	f Person	Area Code Daytime	Telephone Number			
Enclosed is	a check for th	ne following amount:					
	Filing Fee	□ S30.00 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)			
	24 151	ING ADDDESS.	C#917577/7/\\ (D.K	en annoesse.			

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

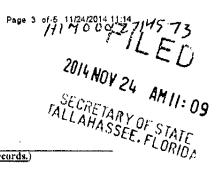
Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

H140002714573

To: +18506176383

Fax: +18508176383

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Osprey 900 LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Flortda Limited Liability Company)

The Articles of Organization for this Limited Liability Company	were filed on November 18, 2014 and assigned
Florida document number L14000179404	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and end with the words "Limited Liab	Discourse DA Laine de MILON de Abrellada MILON
•	ning Company, the designation LLC of the above viation L.E.C.,
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	7301 SW 57th Court Suite 410
	Miami, Florida 33143
Enter new mailing address, if applicable:	7301 SW 57th Court Suite 410
(Mailing address MAY BE A POST OFFICE BOX)	Miami, Florida 33143
· · · · · · · · · · · · · · · · · · ·	
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her  Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent:	<u>.</u>
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is
If Cha	nging Registered Agent, Signature of New Registered Agent
Page	1 of 3

H140002714573

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>	<u>Name</u>	Address	Type of Action
MGR	Andrew D. Fredman	7301 SW 57th Court Suite 410	<b>s</b> Add
		Miami, Florida 33143	□ Remove
			<b>5</b>
			☐ Remove
	<u> </u>	,	□ Add
			Remove
<del></del>			Remove  The Remove
			Report ORIO
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			□ Remove
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		144°-y	Remove
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	NO acceptance with the NOVACE				
	"Southeast" to "SW"				
			······································		
Tree.	ctive date, if other than the da	to of fillings		(optional)	
	effective date must be specific, cannot be date this document is filed by the Florida	e prior to date of receipt or fi	led date and cannot be more th		
the e	one mis occument is they by me rione.				

Signature of a member or authorized representative of a member

Typed or printed name of signee

Stewart H. Lapayowker

Page 3 of 3

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