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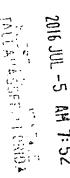
(Reque	stor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates of	Status
Special Instructions to Filir	ng Officer:	

Office Use Only



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COVER LETTER

TO: Registration Se Division of Cor					
	THREE LLC				
SUBJECT:	Name of Lim	ited Liability Company			
	Amendment and fee(s) are sub ondence concerning this matter	-			
	Kenneth Damas				
		Name of Person			
	Adorno-Cunill & Damas,	PL			
		Firm/Company			
	1000 Brickell Avenue			طسم	<u> </u>
		Address		16 JUL	ELA ELA
	Miami, Florida 33131			H-5	HAS
	-	City/State and Zip Code		5 PH	ិត្តដ ស្រុក
	lindadagosto@gmail.com			÷:	73
For further information of	E-mail address: (concerning this matter, please c	to be used for future annual report notifi all:	cation)	: 58	ASSEE, FLORIDA
Kenneth Damas		305 381-9999 at ()			
Name o	of Person	Area Code Daytime	Telephone Number		
Enclosed is a check for t	the following amount:				
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing F Certificate of Certified Copy (additional copy)	Status & y	

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

SO MI VE THREE,LLC			
(Name of the Limi	ited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)		
The Articles of Organization for this Limited Liability Compar	and assigned		
Florida document number _L14000180731			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	ability company here:		
The new name must be distinguishable and contain the words "Limited Lie	ability Company," the designation "LLC" or the abbr	eviation "L.l	L.C."
Enter new principal offices address, if applicable:	·		
(Principal office address MUST BE A STREET ADDRESS)		<u>ಕ</u>	
			<u> </u>
		ည်	S. 25
Enter new mailing address, if applicable:		2	mor
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>	101
		<u>2</u>	
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address h Name of New Registered Agent: New Registered Office Address:		of the ne	<u>w</u>
New Registered Office Address:	Enter Florida street address		
	, Florida		
	City	Zip Code	

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.

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>	Name	Address	Type of Action
MGR	PADRON GONZALEZ, SALVAD	1840 S Miami Ave	
		MIAMI, FL 33129	■ Remove
			☐ Change
MGR	DIAZ PERDOMO, JOSE G	1840 S Miami Ave	□ Add
		MIAMI, FL 33129	■ Remove
			Change
			SELBETARY OF LAHASSEE
MGR	2274 Investments Inc.	200 Biscayne Blvd. Way, #508	PH E.FLORIE
		Miami, Florida 33131	■ Add
			Remove
MGR	Alfahomes Investments Inc.	14750 SW 26 Street Suite 215	□ Change
		Miami, Florida 33185	□ Remove
			□ Change
<u>_</u>			□ Add
٠			□ Remove
			☐ Change

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fective date.	if other than the o	date of filing:		(optio	nal)
n effective date	is listed, the date must	be specific and cannot be p	prior to date of filing or i	nore than 90 days after	filing.) Pursuant to 605.
ote: If the date	: inserted in this bloc ctive date on the Der	ck does not meet the app partment of State's reco	olicable statutory filii rds	ng requirements, this	date will not be liste
	ouve date on the De	partificing of State 31000	143.		
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Page 3 of 3

Filing Fee: \$25.00