9/5/2017



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H170002388983)))



H170002385983ABCD

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 Phone : (305)444-4994 Fax Number : (305)444-4977

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LUNE SAR SE THE SELECTION OF THE LEASE OF THE SER OF THE SERIOR THE SER OF TH

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ROSE HALL TROPICAL, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

O SIMMONS

SEP - 6 2017

١, ;

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ROSE HALL TROPICAL, LLC			
(Name of the Lim	ited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited	Liability Company	were filed on 12/12/2014	and assigned
Florida document number L14000189683	•		_
This amendment is submitted to amend the fol	lowing:		Page 1
This amendment is subtnitted to amend the fold. A. If amending name, enter the new name. The new name must be distinguishable and contain the	of the limited liab	sility company here:	SEP-5
The new name must be distinguishable and contain the	words "Limited Liab	ility Company," the designation "LLC" or	the abbreviation %L.C.
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		1247 NW 21 ST	(i)
		MIAMI, FL 33142	
		1,4	<u></u>
Enter new mailing address, if applicable:		4413 MUNDY LANE	
(Mailing address MAY BE A POST OFFICE BOX)		BRONX, NY 10466	
B. If amending the registered agent and registered agent and/or the new registered of	l/or registered o office address her	ffice address on our records, e e:	nter the name of the new
Name of New Registered Agent:	MARCIA COL	ON	
New Registered Office Address:	1247 NW 21 S	ľ	
		Enter Florida street address	
	MIAMI	Florid	a 33142
		Clay	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.

f Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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
AMBR	KIRKPATRICK BINNS	4000 N, STATE ROAD 7	
		SUITE 409	■ Remove
		LAUDERDALE, FL 33319	Change
AMBR	MARCIA COLON	4413 MUNDY LANE	₩ Add
		BRONX, NY 10466	□ Remove
			□ Change
<u></u>	<u> </u>		□ Add
			Francy Times
	 		FRemove Times Add A 8: 3
			© Change
		1.	□ Remove
			□ Change
			Add
			☐ Remove
			☐ Change

			
	~		
			THE SEP - S AM 8: 34
			SE SE
			20
	···	<u></u>	
	·		<u></u>
			CO31 OF 21 10
:			
			<u> </u>
			
	~		
ctive date, if other than the	ne date of filing:	a date of filtry on more than 90 day	(optional) s after filing.) Pursuant to 605.0207 (
e: If the date inserted in this	block does not meet the applica Department of State's records.	ble statutory filing requiremen	ts, this date will not be listed as t
ament's offeeding cute ou the	Department of State & records.		
ecord specifies a delay-	ed effective date, but not	an effective time, at 12	:01 a.m. on the earlier of:
ne 90th day after the re	ecord is filed.		
09/05	2017		
ed		 •	
سير ا	Miller		
	Signature of a member or author	rized representative of a member	

Page 3 of 3

Filing Fee: \$25.00