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PICK-UP	☐ WAIT	MAIL
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(В	usiness Entity Name	9)
(D	ocument Number)	
Certified Copies	Certificates o	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

	Registration Sec Division of Corp					
CUDIEC	2706 271	2 NE 32 AVE, LLC				
SUBJEC	.1:	Name of Lim	ited Liability Company			
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please re	turn all correspon	ndence concerning this matter	to the following:			
		Daniel A. Jacobson				
			Name of Person		•	
		Daniel A. Jacobson,	P.A.			
			Firm/Company		•	
		901 S. Federal High	way, SUIte 201			
			Address		•	
		Fort Lauderdale, FL	33316			**
			City/State and Zip Code		201 172(
		dan@lawjacobson.co				
		E-mail address: (to be used for future annual report notificat	ion)	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	2170
For furth	er information co	oncerning this matter, please c	all;		· 是 以 6	
Dan Ja	cobson		954 467-3191		PH _	
	Name of	Person	Area Code Daytime Te	elephone Number	13 13	The state of the s
Enclosed	is a check for th	e following amount:	•			
\$25.0	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &	

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

2706 2716 NE 31 AVE LLC

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

The Articles of Organization for this Limited Liability Company we	ere filed on December 15, 2014	and assigned
Florida document number L14000190618	·	,
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabilit	y company here:	
2706 2712 NE 32 AVE LLC		
The new name must be distinguishable and end with the words "Limited Liability	y Company," the designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
_		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
_		
		6.41
B. If amending the registered agent and/or registered offic registered agent and/or the new registered office address here:	e address on our records, enter th	e name of the new
		20 21 · · · · · · · · · · · · · · · · · ·
Name of New Registered Agent:		R
	. 4	- Comment of the control of the cont
New Registered Office Address:	Enter Florida street address	
	· · · · · · · · · · · · · · · · · · ·	
*****	, Florida	⊃
New Registered Agent's Signature if changing Registered Agent	1.2	

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 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

Title	Name	Address	Type of Action
MGR	Julio Daniel Teson	901 S Federal Highway, Suite 201	■ Add
		Fort Lauderdale, FL 33316	□ Remove
MGR	Monica Alejandra Ambrosiก เ	901 S Federak Highway, Suite 201	■ Add
		Fort Lauderdale, FL 33316	□ Remove
MGR	Daniel A. Jacobson	901 S Federal Highway, Suite 201	
		Fort Luaderdale, FL 33316	Remove
	-		C 19 PH C 19 Adut C 19 Remove
			Add Remove

If amending any other information, enter change(s) here: (2	Attach additional sheets, if necessary.)
Effective date, if other than the date of filing: (The effective date must be specific, cannot be prior to date of receipt or filed d the date this document is filed by the Florida Department of State)	(optional) ate and cannot be more than 90 days after
Dated December 18 2014	
D///	
Signature of a member or authorized	representative of a member
Daniel A. Jacobson	
Typed or printed na	me of signee

Page 3 of 3

Filing Fee: \$25.00

