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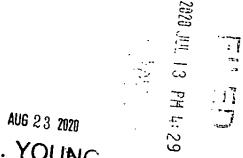
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TO:	Registration Sec Division of Corp				
SUBJEC		GHT HERON LLC, a Florida	limited liability company	•	
		Name of Lim	ited Liability Company		
			-		
		Stephan L. Cohen, Esq.			
			Name of Person	· · · · · · · · · · · · · · · · · · ·	
		Stephan L. Cohen, P.A.			
Firm/Company 20801 Biscayne Blvd., Suite 400					
			Address		
		Aventura, FL 33180	Name of Person ohen, P.A. Firm/Company one Blvd., Suite 400 Address . 33180 City/State and Zip Code loridaTitle.com mail address: (to be used for future annual report notitication) atter, please call:		
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ror turth	ter information co	ncerning this matter, please ca	ill:		
Stephan	L. Cohen, Esq.				
	Name of	Person		ne Telephone Number	
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Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

3

BLACK NIGHT HERON LLC			
(Name of the Limited Lie	bility Company as it now appears orida Limited Liability Company)	s on our records.)	
W. L. W.	maa isamee islaamiy company)		ω
The Articles of Organization for this Limited Liabilit	y Company were filed on $\frac{2/1}{}$	1/15	and assigned
Florida document number 1.15000026245			<u>-</u>
This amendment is submitted to amend the following	y:		9
A. If amending name, enter the new name of the	limited liability company he	<u>re</u> :	
The new name must be distinguishable and contain the words	Limited Liability Company," the de	esignation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AL	DRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX			
	<u>-</u>		
B. If amending the registered agent and/or registered agent and/or the new registered office address her		ecords, <u>enter the na</u>	me of the new registered
agent and/or the new registered writes address ner	Σ.		
Name of New Registered Agent:			
New Registered Office Address:	Enter Flori	ida street address	
	City	Florida _	Zip Code
Your Donistaned Agent's Cignotum of abancing Degist	and to a		•

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

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MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	Nicholas Gordon-Smith	3737 Collins Avenue, Unit North-401	= ∧dd
		Miami Beach, FL 33139	□Remove
		 	□ Change
Member	Gabriela Gordon-Smith	3737 Collins Avenue, Unit North-401	= Add
		Miami Beach, FL 33139	□Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
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N. 00				
Effective date, if other than If an effective date is listed, the date Note: If the date inserted in thi document's effective date on the	must be specific and cannot be prices block does not meet the appl	icable statutory filing rec		
e record specifies a delayed effeord is filed.	ctive date, but not an effective	time, at 12:01 a.m. on th	ne earlier of: (b) The 90th	h day after the
Dated	2020			
	ludas Gordon-Smith			
Mo	udas Gordon-Smith	. , 		<u></u>
└ -F5	99499Signature of a member or aut	norized representative of a	member	
Nicholas Gordon-Sn	nith			
	Typed or priv	nted name of signee	<u> </u>	

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