

L1500003 1269

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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S Warren  
SEP 08 2016

LAW OFFICE OF  
**ROBERT G. HARRIS, P.A.**

THE PLAZA - SUITE 801  
5355 TOWN CENTER ROAD  
BOCA RATON, FLORIDA 33486  
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E-MAIL: rharris571@aol.com

Via Fed Express 8612 5137 5978

September 6, 2016

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

Re: Amendment to 504-512 NW 3RD AVENUE LLC  
Amendment to 811 NW 1ST STREET, LLC  
Amendment to SUDS MACHINE, LLC

Dear Secretary of State Department:

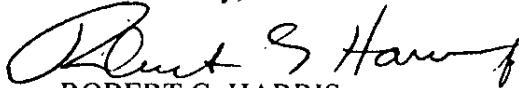
Enclosed please find three signed amendments for the above three LLCs.

Also, enclosed my check for filing fee of \$90.00(filing fee and certificate of status).

Please process as soon as possible.

If you need anything else, please let me know.

Sincerely,

  
ROBERT G. HARRIS

RGH/hf  
Enclosures



**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

504-512 NW 3RD AVENUE, 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 were filed on 01/20/2015 and assigned Florida document number L15000032169.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

**(Principal office address MUST BE A STREET ADDRESS)**

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Enter new mailing address, if applicable:

**(Mailing address MAY BE A POST OFFICE BOX)**

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent: \_\_\_\_\_

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	CINGRA INVESTMENTS, INC	6051 N Ocean Dr #704 ,	<input checked="" type="checkbox"/> Add
		Hollywood, FL 33019	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
P/MGR	Simpson, Forest V.	6051 N Ocean Dr #704,	<input type="checkbox"/> Add
		Hollywood, FL 33019	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
S/MGR	Simpson, Stella F.	6051 N. Ocean Dr. #704	<input type="checkbox"/> Add
		Hollywood, FL 33019	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

Multiple horizontal lines for amending information.

**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  
(b) The 90th day after the record is filed.

Dated 9-3, 16.

 Stella F. Simpson  
Signature of a member or authorized representative of a member

FOREST VIRGIL SIMPSON, STELLA F. SIMPSON

Typed or printed name of signee

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