## Floridal Department of State Division of Observations Electronic Phints Covery Sheet

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BOFILL FAMILY HOLDINGS LLC.

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OCT 27 2017

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION

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ART	CICLES OF	ORGANIZA'	TION	•	1 - 1
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E	OFILL FAMIL	Y HOLDINGS LLC	2.		
		roany as it now appeared Liability Company)		<del></del> `-}	はら くご
	(A Florida Limite	so Liability Company)	•	•	
The Articles of Organization for this Limited I	Liability Compa	ny were filed on	02/23/2015	and assigno	al C
Florida document number L15000032992			· · · · · · · · · · · · · · · · · · ·		5
This amendment is submitted to amend the fol	lowing:				
	•		•		
A. If amending name, enter the new name of	of the limited li	ability company he	<u>ere</u> :		
N/A				1	
The new name must be distinguishable and contain the	words "Limited Li:	ability Company," the o	designation "LLC" or	the abbreviation "L.L.C."	<del>,                                    </del>
Enter new principal offices address, if appli	cable.	N/A	•		
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Enter new mailing address, if applicable:	Ÿ	N/A	· · · · · · · · · · · · · · · · · · ·		
(Mailing address MAY BE A POST OFFICE	E BOX)				
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B. If amending the registered agent and	Vor registered	office address or	our records a	uter the name of t	ho new
registered agent and/or the new registered o	office address h	ere:		Meet ene ublice of i	<u> </u>
Name of New Registered Agent:	N/A				1
	27/4		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	N/A	<del></del>	· · · · · · · · · · · · · · · · · · ·		
		Enter Flo	rida street address		
			, Flori	ia	
		City		Zlp Code	
New Registered Agent's Signature, If changing	Registered Ages	n <u>t:</u>		•	
I hereby accept the appointment as register	ed agent and a	gree to act in this	capacity. I furth	er aeree to comply w	rith the
provisions of all statutes relative to the proj	per and comple	te performance of	my duties, and i	am familiar with an	ıd İ
accept the obligations of my position as reg	ristered agent a	s provided for in (	Chapter 605, F.S.	Or, if this documer	ıt is
being filed to merely reflect a change in the company has been notified in writing of this	: registerea ogti s change	ce adaress, I perel	by confirm (hat t 	he limited liability	
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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

<u>Itle</u>	Name	<u>Address</u>	Type of Actio
MGR-M	EDWARD BOFILL, JR.	532 PALMETTO DRIVE	D Add
		MIAMI SPRINGS, FL 33166	
			€ Change
dgr-m	BETSY C. FUNDORA	532 PALMETTO DRIVE	
		MIAMI SPRINGS, FL 33166	□ Remove
			■ Change
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☐ Change

	H 170 nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	~ 0 Z X	10 1
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an eme <u>Ofet</u> Cumi	dive date, if other than the date of filing:  [coptional]  fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Purst If the date inserted in this block does not meet the applicable statutory filing requirements, this date will nearl's effective date on the Department of State's records.	ot be listed as	s the
The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the 90th day after the record is filed.	ne earller o	f:
ited _	Signature of a member obsuit or suppress trabe of a member	<del></del> -	
	Edward To Botall Tr.		1

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