

L15000055274

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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15 JUN - 1 PM 12:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN - 2 2015

T. BROWN

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 31 AVENUE INVESTMENTS, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROBERT KAHN

Name of Person

Firm/Company

4522 SHERIDAN AVE

Address

MIAMI BEACH, FL 33140

City/State and Zip Code

robert@goodearthproperty.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

robert kahn

305

305 672 0469

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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

AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

31 AVENUE INVESTMENTS, LLC

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

FILED
15 JUN -1 PM 12:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 3/27/2015 and assigned
Florida document number L15000055274.

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 "L.L.C."

Enter new principal offices address, if applicable:

14829 NW 7 AVE

(Principal office address MUST BE A STREET ADDRESS)

MIAMI, FL 33168

Enter new mailing address, if applicable:

14829 NW 7 AVE

(Mailing address MAY BE A POST OFFICE BOX)

MIAMI, FL 33168

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:

ROBERT BAILEY

New Registered Office Address:

14829 NW 7 AVE

Enter Florida street address

MIAMI

Florida 33168

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

or removed from our records:

MGR = Manager

AMBR = Authorized Member

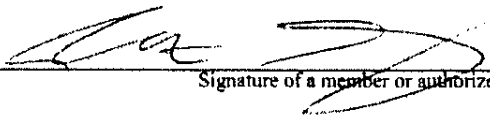
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AP	ROBERT KAHN	4522 SHERIDAN AVE	<input type="checkbox"/> Add
		MIAMI BEACH, FL 33140	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ROBERT R. BAILEY	14829 NW 7 AVE	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33168	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	BRETT T. BAILEY	14829 NW 7 AVE	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33168	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	WILLIAM D. BAILEY, JR.	14829 NW 7 AVE	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33168	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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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 MAY 15 2015



Signature of a member or authorized representative of a member

ROBERT R. BAILEY

Typed or printed name of signee