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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : RASCO KLOCK PEREZ & NIETO, P.L.

Account Number : 104076000124 Phone : (305)476-7100 Fax Number : (305)476-7102

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: ____abazo@rascoklock.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 2727 INVESTMENTS, LLC

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O SIMMONS

OCT 28 2020

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2320 GC. 27 PH 12: Ch

2727 INVESTMENTS LLC	
(Name of the Limited Liability Company as it no (A Florida Limited Liability Co	w appears on our records.) mpany)
The Articles of Organization for this Limited Liability Company were file	d on 04/14/2015 and assigned
Florida document number L15000065069	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability com	pany here:
The new name must be distinguishable and contain the words "Limited Liability Compar	sy," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
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 o agent and/or the new registered office address here:	n our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	Inter Florida street address
	Florida
City	, Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agree to act provisions of all statutes relative to the proper and complete performs	

accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is heing 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>	Name	Address 00 27 PH 12: 34	Type of Action
MGR	CORREA, EDUARDO	2555 PONCE DE LEON BLVD SUITE 600	≣Add
		CORAL GABLES FL 33134	□Remove
			Change
			□Add
			□Remove
			[]Change
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document's of	rective date o	n the Depart	iment of	State s re	cords.								
he record speciford is filed.	ics a delayed	effective dat	e, but no	ot an effec	ctive tin	nc, at 12:	:01 a.m.	on the	: earlie	er of: (b) The	90th da	y after the
Dated OCTOR	3ER 26			2020			\supset						
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