	Division of Corporations Electronic Filing Cover Sheet
	Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.
	(((H15000154123 3)))
	H150001541233ABCW Note: DO NOT hit the REFRESH/RELOAD button on your browser from this
	page. Doing so will generate another cover sheet.
	To: Division of Corporations Fax Number : (850)617-6383 From: Account Name : SNYDER GROISMAN P.A.
	Account Number : 120120000060 Phone : (786)899-2880 Fax Number : (786)899-2890
	دی ﷺ ۲۰۰۳ ۳۰۰۳ Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**
	Email Address:
-:L) 2: 54	LLC AMND/RESTATE/CORRECT OR M/MG RESIGN THIRD FUND 18, LLC
B.	Certified Copy 0
JUN 23	Page Count 04 Estimated Charge \$25.00
5 T	Examiner JUN 2 4 20

To: Page 9 of 17

2015-06-23 18 24:42 (GMT)

786-899-2890 From: Melissa Grolsman

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: THIRD FUND 18, 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:

MYLES MOCEGA

Name of Person

SNYDER GROISMAN, P.A.

Firm/Company

21500 BISCAYNE BLVD. SUITE 401

Address

AVENTURA, FL 33180

City/State and Zip Code

MYLES@SNYDERGROISMAN.COM

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

For further information concerning this matter, please call:

MELISSA GROISMAN at (786) 899-2880 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

Page 10 of 17	2015-06-23 18 24:42 (GMT)	786-899-2890 From: Melissa Groi:
		11 mm
	ARTICLES OF AMENDMENT	N 2015 JUN 23 AM 8: 33 FALLAMASSEE. FLORID,
	ТО	2015 JUN 20
	ARTICLES OF ORGANIZATION	N AM 8: 33
	OF	TATING GARY D-
		ALLAHASSEE FIATE
	THIRD FUND 18, LLC	
	(Name of the Limited Liability Company as it now appears on ou (A Florida Limited Liability Company)	ar records.)
The Articles of Organization	for this Limited Liability Company were filed on0	06/12/2015 and assigned
	-	
Florida document number		
This amendment is submitted	I to amend the following:	
A. If amending name, enter	r the new name of the limited liability company bere:	
•		
The new name must be distinguish:	able and contain the words "Limited Liability Company," the designati	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices	address, if applicable:	
	IST BE A STREET ADDRESS)	
12 Thatpia Office address into		
Fator your mailing address	if applicable.	
Enter new mailing address,	••	
Enter new mailing address, <u>(Mailing address MAY BE A</u>	••	
	••	
(Mailing address MAY BE A	A POST OFFICE BOX)	
(Mailing address MAY BE A B. If amending the regist	tered agent and/or registered office address on our	records, enter the name of the new
(Mailing address MAY BE A B. If amending the regist	A POST OFFICE BOX)	records, enter the name of the new
(Mailing address MAY BE A B. If amending the regist registered agent and/or the	tered agent and/or registered office address on our new registered office address here:	records, enter the name of the new
(Mailing address MAY BE A B. If amending the regist	tered agent and/or registered office address on our new registered office address here:	records, enter the name of the new
(Mailing address MAY BE A B. If amending the regist registered agent and/or the	A POST OFFICE BOX)	
(Mailing address MAY BE A B. If amending the regist registered agent and/or the <u>Name of New Regist</u>	A POST OFFICE BOX)	
(Mailing address MAY BE A B. If amending the regist registered agent and/or the <u>Name of New Regist</u>	A POST OFFICE BOX)	

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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2015-06-23 18:24:42 (GMT)

786-899-2890 From: Melissa Groisman

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	<u>Address</u>	Type of Action	
MGR	BASSAN, DAVID	20900 NE 30TH AVENUE #507	🖸 Add	
		AVENTURA, FL 33180	Remove	
			Change	
MGR	HAMMER, ABRAHAM	20900 NE 30TH AVENUE #507	🖸 Add	
		AVENTURA, FL 33180	X Remove	
			Change	
MGR	BENZAQUEN, JOSE	20900 NE 30TH AVENUE #507	CI Add	
		AVENTURA, FL 33180	X Remove	
			Change	
MGR	BAIT REAL ESTATE, LLC a Florida limited liability company L13000083962	20900 NE 30TH AVENUE #507	⊠ ∧dd	
		AVENTURA, FL 33180	Remove	
			🗆 Change	
<u> </u>	·			
<u></u>		ليد ايد (ين)		
			_ 🗆 Change	

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To: Page 12 of 17

786-899-2890 From: Melissa Groisman

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

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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.

23 15 Dated Signature of a member or pathorized representative of a member Me brized Sman or printed name of signee

Page 3 of 3 Filing Fee: \$25.00