LIS 000 156 150

(Requestor's Name)			
(Address)			
(Address)			
(Notices)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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Codifical Coales Codificates of Change			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			





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FILED

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE TIGER INVESTMENTS, LLC

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

EYE OF

company has been notified in writing of this change.

The Articles of Organization for this Limited Liability Con	mpany were filed on 09/14/2015 and assigned				
Florida document number <u>L15\$\$\$15\$</u>	,				
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 "Limite	ed Liability Company," the designation "LLC" or the abbreviation "LLC."				
Enter new principal offices address, if applicable:	1080 NW 97TH AVE				
(Principal office address MUST BE A STREET ADDRE	PEMBRORE PINES, FL 33024				
	24 JUN F				
Enter new mailing address, if applicable:	1080 NW 97TH AVE = F				
(Mailing address MAY BE A POST OFFICE BOX)	PEMBROKE PINES FE 33224				
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:	20SELINE NOEL				
New Registered Office Address:	Enter Florida street address				
P	EMBROKE PINES Florida 33044				
New Registered Agent's Signature, if changing Registered	Agent:				
I hereby accept the appointment as registered agent ar	nd 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

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	Type of Action
P	PATRICK NOEL	2926 NW 72ND AVE	□Add
		MIAMI, FL 33122	🗹 Remove
			□Change
P	POSELINE NOEL	1080 NW 97TH AVE	□Add
		PEMBROKE PINES, FL 33024	□Remove
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			🗆 Add
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