Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : PERLMAN, BAJANDAS, YEVOLI, & ALBRIGHT P.L.

Account Number : 120040000167 Phone : (305) 377-0809 Fax Number : (305)377-0781

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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BBA SUNRISE, LLC

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Electronic Filing Menu

Corporate Filing Menu

JUL 05 2018

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	RISE, LLC				
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on Liability Company)	our records.)			
The Articles of Organization for this Limited Liability Company	were filed on	09/21/2015		and assi	g
Florida document number L15000159972					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited lish	ility company here:				
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the design	ation "LLC" or th	ne abbrevi	ation "U.L	C.
Enter new principal offices address, if applicable:	10800 NW 21ST ST	1			
(Principal office address MUST BE A STREET ADDRESS)	UNIT 100		<u></u>	2913	
	MIAMI, FL 33172		7	يت	
			T- :		
Enter new mailing address, if applicable:	10800 NW 21ST ST		42	င်	1
Mailing address MAY BE A POST OFFICE BOX)	UNIT 100			≥	ĺ
	MIAMI, FL 33172				Ę
			<u> 주</u> 요.	_	
 If amending the registered agent and/or registered of egistered agent and/or the new registered office address here 		r records, <u>en</u> i	<u>ter the</u>	mame o	<u>if t</u> l
Name of New Registered Agent:					
New Registered Office Address:					
	Enter Florida si	reet address			
		, Florida			
	City		Z	p Code	

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with t provisions of all statutes relative to the proper and complete performance of my duttes, 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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Ac
MGR	BUSTOS, RODOLFO A	BELGRONO 2080	Add
		PISO I, DPT A	Remove
		CORRIENTES, CORRIENTES 34	Change
MGR	Leandro N. Vila	10800 NW 21ST ST	■ Add
		UNIT 100	☐ Remove
		MIAMI, FL 33172	() Change
MOR	Mateo Cristóbal	10800 NW 21ST ST	
		UNIT 100	Remove
		MIAMI, FL 33172	
			Change
			Add
			Remove
			Change
			Remove
			Change

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in effective da ote: If the d	e is listed, the date must be specific and cannot be prior to ci te inserted in this block does not meet the applicable	ate of filing or more than 90 days after filing.)	ruisuani to ot /ill not be li:
cument's ef	ective date on the Department of State's records.		
record sp	ecifles a delayed effective date, but not ar	n effective time, at 12:01 a.m. o	n the earl
	ay after the record is filed.	·	
nted	July 2 2018		
	Signature of member or authorize	a representative of a member	
	Signature of member or authorize Ricardo Bajandas, Authoriz	·	

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