

15000163392

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

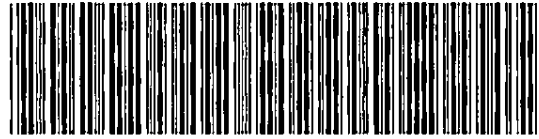
(Business Entity Name)

(Document Number)

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IRA R. SHAPIRO, P.A.

ATTORNEY AND COUNSELOR AT LAW
BAYLEE EXECUTIVE CENTER - SUITE 225
16375 NORTHEAST 18TH AVENUE
NORTH MIAMI BEACH, FLORIDA 33162

IRA R. SHAPIRO

DADE: (305) 944-3936
BROWARD: (954) 763-5801
FACSIMILE: (305) 944-3345
EMAIL: info@irarshapiro.com

October 12, 2018

VIA FEDEX 773454052985

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: 3660 SW 24 Ter LLC
Articles of Amendment

To Whom It May Concern:

Please find enclosed an Articles of Amendment to Articles of Organization for 3660 SW 24 Ter LLC, a Florida limited liability company. Also enclosed is my check in the amount of \$25.00 for the filing fee.

Sincerely,



IRA R. SHAPIRO

IRS/sma

Encl.

scorp_griaznov 101118.2

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 3660 SW 24 TER 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:

IRA R. SHAPIRO
Name of Person
IRA R. SHAPIRO, P.A.
Firm/Company
16375 NE 18th Avenue, Suite 225
Address
North Miami Beach, FL 33162
City/State and Zip Code
office@irarshapiro.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ira R. Shapiro at (305) 944-3936
Name of Person Area Code Daytime Telephone Number

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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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

3660 SW 24 TER LLC

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

The Articles of Organization for this Limited Liability Company were filed on SEPTEMBER 24, 2015 and assigned Florida document number L15000163392.

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:

16375 NE 18th Avenue, Suite 225

(Principal office address MUST BE A STREET ADDRESS)

North Miami Beach, FL 33162

Enter new mailing address, if applicable:

16375 NE 18th Avenue, Suite 225

(Mailing address MAY BE A POST OFFICE BOX)

North Miami Beach, FL 33162

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TALLAHASSEE, FLORIDA

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: _____

New Registered Office Address: _____

Enter Florida street address

_____, **Florida**

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

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	KONSTANTIN GRIAZNOV	16375 NE 18th Avenue, Suite 225	<input type="checkbox"/> Add
		North Miami Beach, FL 33162	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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

Multiple horizontal lines for amending information.

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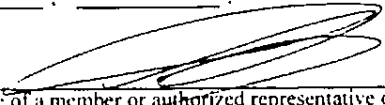
E. Effective date, if other than the date of filing: _____ (optional)

(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 Oct. 10 2018



Signature of a member or authorized representative of a member

KONSTANTIN GRIAZNOV

Typed or printed name of signee