Division of Corporations 2/22/2021



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Division of Corporations

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 676 NW 48TH STREET, LLC

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From: Yanet Avila

If Changing Registered Agent, Signature of New Registered Agent

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

676 NW 48TH STREET, LLC				
(Name of the Limited Liabilia (A Florida	ty Company as it now appears a Lunited Liability Company)	un our records.)		
The Articles of Organization for this Limited Liability C	ompany were filed on 10/3	0/2015	and assign	ui!
Florida document number 1.15000184786	<u>_</u> .			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limi	ited liability company her	<u>'e</u> :		
676 NW 47TH STREET, LLC				
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the de-	signation "LLC" or the ab	obreviation "L.E. (-
Enter new principal offices address, if applicable:				·
(Principal office address MUST BE A STREET ADDR	(ESS)			
			-	
Enter new mailing address, if applicable:		····		
Enter new mailing address, if applicable: (<u>Mailing address MAY BE A POST OFFICE BOX)</u>				
	d office address on our re	cords, <u>enter the nan</u>	ne of the new r	register
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered	d office address on our re	cords, <u>enter (he nam</u>	ne of the new r	register
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office address here:			ne of the new r	register
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office address here: Name of New Registered Agent:	Enter Flori	hz street uddress		
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office address here: Name of New Registered Agent:	Enter Flori	hz street uddress		
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(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office address here: Name of New Registered Agent:	Enter Florie City	hz street uddress		

Change

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

Title	<u>Name</u>	Address	Type of Action
	***************************************		□Add
			☐Remove
			□ □ Change
<u>_</u>			CTAdd
			□Remove
			CiChange
		11 A. C.	□Add
			□Remove
			□Change
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E. Effective date, if other that (If an effective date is listed, the da	n the date of filing:	7	(option:	al)
Note: If the date inserted in t document's effective date on	his block does not meet the	e applicable statutory	filing requirements, this de	ate will not be listed as the
f the record specifies a delayed of word is filed.	Tective date, but not an effe	ective time, at 12:01	a.m. on the earlier of: (b)	The 90th day after the
Dated 2/22	2021	l ·		
1.0	A. Valdes. Signature of a member			

Typed or printed name of signee