

From:

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#759 P.001/004

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Account Number : 075350000353
Phone : (800) 221-2972
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
3700 NORTH EAST LLC

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TALLAHASSEE, FLORIDA

FILED
15 DEC -2 AM 11:38
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TALLAHASSEE, FLORIDA

From:

12/02/2015 10:07

#759 P.002/004

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

3700 NORTH EAST 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 11/02/2015 and assigned
Florida document number 145000186043

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

3700 NE 5TH DRIVE

BOCA RATON, FL 33431

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3700 NE 5TH DRIVE

BOCA RATON, FL 33431

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:

ACCOUNTAX & PAYROLL, INC.

New Registered Office Address:

1908 LAND O LAKES BLVD SUITE #4

Enter Florida street address

LUTZ

City

Florida 33549

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 603, 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.

Dania Wabba
If Changing Registered Agent, Signature of New Registered Agent

From:

12/02/2015 10:07

#759 P.003/004

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records.

MGR = Manager

AMBR = Authorized Member

Title	Name	Address	Type of Action
Assist. Manager	Shan Hossaini	85-26 210 St Queens village New York 11427	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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#759 P.004/004

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

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

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated DECEMBER 01, 2015



Signature of a member or authorized representative of a member

OBAID HOSSAINI

Typed or printed name of signer

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