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Special Instructions to	Filing Officer:	





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01/19/16--01013--023 **25.00

J. HARRIS

COVER LETTER

то:	Registration Se- Division of Cor			
CHDI	Arion Fund.	, LLC		
SUBJ.	ECT:	Name of Lim	ited Liability Company	
The er	nclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
	•	Ofir Badash		
			Name of Person	
		Newman Holdings, LLC		
			Firm/Company	7-31 - 377 47 - 7
		3284 N 29th Court		
			Address	
		Hollywood, FL 33020		
			City/State and Zip Code	
		snewman@newmanbrokera		
For fu	rther information co	E-mail address: (oncerning this matter, please ca	to be used for future annual report notif all:	ication)
	Badash	•	954 536-4525	
	Name of	f Person	at () Area Code Daytime	Telephone Number
Enclos	sed is a check for th	e following amount:		
■ \$2	5.00 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

Arion Fund, LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our re ited Liability Company)	ecords.)
The Articles of Organization for this Limited Liability Comp	pany were filed on 11/20/2015	and assigned
Florida document number L15000196903		
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 l	Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		75. (C) 27. (C
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
		See
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		5, 8 5, 8
		gr o
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		cords, <u>enter the name of the n</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street a	address
		_, Florida
	Ciţy	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>	Address	Type of Action
MGR	Ariel Lerner	3284 N 29th Court	■ Add
		Hollywood, FL 33020	Remove
			☐ Change
MGR	Aharon Zohar	3284 N 29th Court	= Add
		Hollywood, FL 33021	□ Remove
			☐ Change
			Add
			Remove
			☐ Change
			□ Add
			Remove
			Change
			Add-
			Remove
			C5 C6 C6 C6 C6 C6 C6 C6
			Add
			Remove
			☐ Change

Signature of a member or authorized representative of a member				_							
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Filing Fee: \$25.00