	elow) on the top and bottom of	er sheet. Type the fax auc	
	(((H1800032		••
 	H18000321432	і і і і і і і і і і і і і і і і і і і	
Note: DO NOT hit	the REFRESH/RELOAD butt will generate anoth		
	Division of Corporation: Fax Number : (630)6		
P	Account Name : FASTK1 Account Number : I20100 Phone : (305)5 Fax Number : (305)5	00000 9 99-0839	
Enter the emai annual rep Email Addr	<pre>il address for this bus; ort mailings. Enter onl ess:</pre>	iness entity to be u y one email address	nsed for future please.
LLCA	MND/RESTATE/CORE	RECT OR M/MG RI	ESIGN
	400 SI HOLDI	NGS LLC	7
· ·	Certified Copy	0	
	age Count istimated Charge	03 \$25.00	
r			

11/7/2018

•

.

:

	1			
	ARTICLES OF AM	TENDMENT		
	TO			
	ARTICLES OF ORG	ANIZATION		
	OF			
	400 SI HOLDINGS			
	(Name of the Limited Liability Comp- (A Florida Limited	noy as it now appears Liability Company)	on our records.)	
		-		
	or this Limited Liability Company	were filed on	11/30/2015	and assigned
Florida document number	L15000199606			
This amondment is submitted	to amend the following:			
A. If amending name, enter	the new name of the limited liab	ilits company here	ו	
N/A			•*	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	ole and contain the words "Limited Liabi	lity Company " the desi	impetion #11 C? on the of	LP LP
		siy company, ne day	אים אים אים אים איים. אין יילך	
Enter new principal offices a	ddress, if applicable:	<u>N/A</u>		· · · · · · · · · · · · · · · · · · ·
(Principal office address MU)	<u>T BE A STREET ADDRESS)</u>		60 	<u> </u>
			`ř,	TH
				ـــــــــــــــــــــــــــــــــــــ
Enter new mailing address, i	Capplicable:	N/A		
Mailing address MAY BE A	POST OFFICE BOX	_		120
B. If amending the register	ed agent and/or registered office	address on our red	ords, enter the na	me of the new
registered agent and/or the n	w registered office address here	2:		

<u>Name of New Regist</u>	yed Agent:	Francisco Miralles		
New Registered Offic	e Address:	990 Biscayne Blvd #)		
	• •	-*	Enser Florida street address	
		Miami		rida <u>33132</u>
New Registered Agent's Signat	are, if changing Reg	City ristered Agent:	MAN	Zip Code
I hereby accept the appointm provisions of all statutes rela accept the obligations of my	tive to the proper .	and complete perform	ance of my duries and	I am familiar with and

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

Page 1 of 3

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

Title	Name		Address	Type of Action
MGR	global real e	state investment LLC	PO BOX 0991	🖸 Add
			MIAMI FL 33119	Remove
MGR	DOGES TRAD	NG AND REALTIES INC	400 SUNNY ISLES BLVD #922	Change
			SUNNY ISLES BEACH, FL 33160	Change
·····				DbAd
				П Ксточе
				Change
			<u> </u>	🖸 Add
				Remove
				С Свалде
	<u> </u>			🗆 Add
				C Remove
				Change
 -				🖸 Add
				П Ксточе
				Change
		Page 2	of 3	

• • •

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

	· · ·	
<u> </u>		
· <u> </u>		
	الحبر	
		-11
		FIL 50
		1.1
·····		0
<u> </u>		
	······································	
<u></u>		

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 <u>NOVEMBER</u>	JAPA I
	Signature of a member or authorized representative of a member
	DOGES TRADING AND REALTIES INC
	Typed or printed name of signee

Page 3 of 3