12/20/2019

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To: Division of Corporations : (850)617-6383 Fax Number from: Account Name : SERBER & ASSOCIATES, P.A. Account Number : 120000000083 : (305)932-6262 Phone : (305)933-9393 Fax Number **Enter the email address for this business entity to be used for fature annual report mailings. Enter only one email address please. 2013 DEC 20 PH 11: 41 Enall Address: Into @ little law firm war LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

BERECOSTA 333 LLC

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	ICLES OF	F AMENDMENT TO ORGANIZATION OF	¥	ε,	i i
BERECOSTA 333 LLC					
(Nome of the Limi	ted Linbility Con	pany as it now appears on or id Liability Company)	ir records.	_ ∽	
The Articles of Organization for this Limited L Florida document number L15000208993					
This amendment is submitted to amend the foli	owing.			20	
A. If amending name, enter the new name of		ability company here:		TO FER	
The new name must be distinguishable and end with the	words "Limited L	iability Company," the designa	tion "LLC" or the Abbreviati	on on C."	-
Enter new principal offices address, if appli-		1124 Kane Cond	L		_
(Principal office address MUST BE A STREI		Bay Harbor Islan	d		
		Florida 33154			-
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1124 Kane Cond			-
		Bay Harbor Islan	10		_
		Florida 33154			
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:	ffice address b		records, <u>enter the na</u>	me of the	new
New Registered Office Address: 1124 Kane Concourse Enter Florida street address					
			ei address		-
	Bay Harb	or Island	Florida Florida :	33154	
Marie Daniela and Araba de Caracteria de Caracteria de Caracteria de Caracteria de Caracteria de Caracteria de		City	, Florida Florida : Zip C	ode	-
New Registered Agent's Signature, if changing		-			
l hereby accept the appointment as registere provisions of all statutes relative to the prop accept the obligations of my position as reg	er and comple	ite performance of my di	itles, and I am familiar	with and	

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

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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= M AMBR≖ A	ionager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Goldfarb, Bernardo	2945 NE 185TH ST	
		Suite 1410	= Runore
		AVENTURA, FL 33180	
MGR	Kirstein, Lidia	2945 NE 185TH ST	
		Suite 1410	B Remove
		AVENTURA, FL 33180	
MGR	Irene B. Reed	1124 Kane Concourse	■ Add
		Bay Harbor Island	□ Remove
		Florida 33154	_
			🗆 Add
			🛘 Rémove
			_
			[] Add
			[] Remove
			_
			🗆 Add
			Remove
			_

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D.	If amending any other information, enter change(s)	here: (Attach addittonal sheets, if necessary.)
E.	Effective date, if other than the date of filing: (The effective date runst be specific, cannot be prior to date of receipt the date this document is filed by the Florida Department of State)	(optional) st or filed date and cannot be more than 90 days after
	Dated December 19\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	\mathbf{I}_{-}
	Tube	
	Signature of a mamber of	authorized representative of a member
	Bernardo Goldfarb	
	Lyped or	printed name of signice

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