## 45000212646

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2016 NOV -7 PM 4: 58
SECRETARY OF STATE

K. SALY NOV - 8 2016

## **COVER LETTER**

TO: Registra Division	ion Section of Corporations	
Spe	dlight Properties LLC	
SUBJECT:	Name of Limited Liability Company	
The enclosed Arti	eles of Amendment and fee(s) are submitted for filing.	
Please return all c	prrespondence concerning this matter to the following:	
	Arthur Kulick	
	Name of Person	
	Speedlight Properties	
	Firm/Company	
	801 Brickell Avenue Suite 918	
	Address	
	Miami, FL 33131	
	City/State and Zip Code	
	akulick@asifo.com  E-mail address: (to be used for future annual report notification)	
For further inform	ation concerning this matter, please call:	
Arthur Kulick	305 789-6659 at ()	
	Name of Person Area Code Daytime Telephone Number	
Enclosed is a chee	k for the following amount:	
■ \$25.00 Filing	Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)  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

ZOIGNOV-7 PM 4:58
TALLAHASSEE, FLORIDA

Speedlight Properties LLC

(Name of the Limited Liability Company as it now appears on our records.

(A Florida Limited Liability Company)

(A Florida Emilieu	Diability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L15000212646	were filed on 12/24/2015 and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	101 NE 3rd Avenue	
(Principal office address MUST BE A STREET ADDRESS)	Suite 1500	
	Fort Lauderdale, FL 33301	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	101 NE 3rd Avenue Suite 1500	
	Fort Lauderdale, FL 33301	
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her  Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
<del></del>	, Florida City 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 or removed	g Authorized Person(s) authorized to r from our records:	manage, <u>enter the</u>	e title, name, and address of each	person being adde
MGR = M $AMBR = A$	lanager uthorized Member		2016 NOV -7 PM 4: 58	
Title	<u>Name</u>	Address	SECRETARY OF STATE FLORIDA	Type of Action
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ffective date, if	f other than the date of filing: (optional)	
an effective date is	s listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Poinserted in this block does not meet the applicable statutory filing requirements, this date wi	ursuant to 605.0207
	tive date on the Department of State's records.	ii not be listed as
record spec	cifies a delayed effective date, but not an effective time, at 12:01 a.m. on	the earlier of
	y after the record is filed.	
ated November	22 , 2016 ,	
	1500	
	Signature of a member of a thorized representative of a member	
Arthur	<sup>-</sup> Kulick	

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Filing Fee: \$25.00