

L16000010664

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

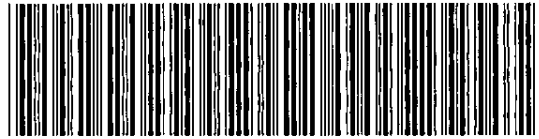
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200281710392

02/03/16--01008--010 **25.00

RECEIVED
16 FEB -3 PM 1:38
TO: CORPORATE
SUFFICIENT OFF FILING

FILED
2016 FEB -3 A 10:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FEB 04 2016

3 MASON

CourierXpress

Requester's Name

Address

Monticello, FL 850-832-8365

City/State/Zip

Phone

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. 4200 N. Federal Hwy Holding, LLC
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)
5. _____
(Corporation Name) (Document #)
6. _____
(Corporation Name) (Document #)
7. _____
(Corporation Name) (Document #)

Walk in

Pick up time _____

Certified copy

Mail out

Will wait

Photocopy

Certificate of Status

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 4200 N FEDERAL HWY HOLDING, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALEXIS GONZALEZ
Name of Person
AGE RE SERVICES, LLC
Firm/Company
3162 COMMODORE PLAZA, SUITE 3E
Address
COCONUT GROVE, FL 33133
City/State and Zip Code
ALEXIS@AGLAWPA.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ALEXIS GONZALEZ at (**305**) **223-9999**
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 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**

4200 N FEDERAL HWY HOLDING LLC

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

FILED
2016 FEB -3 A 10 39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on JANUARY 15, 2016 and signed
Florida document number L16000010664

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

4220 N FEDERAL HWY HOLDING LLC

The new name must be distinguishable and contain 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

AGE RE SERVICES, LLC

New Registered Office Address:

3162 COMMODORE PLAZA, SUITE 3E

Enter Florida street address

COCONUT GROVE

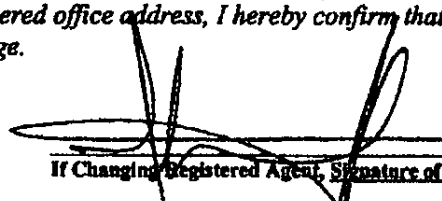
Florida 33133

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 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>	<u>Address</u>	<u>Type of Action</u>
MBR	RAUL GUTIERREZ	2900 N.W. 77TH COURT	<input type="checkbox"/> Add
		MIAMI, FL 33122	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGMR	DIRK J. LENS	2900 N.W. 77TH COURT	<input type="checkbox"/> Add
		MIAMI, FL 3 3122	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ALEXANDROS XAKOUSTIS	2900 N.W. 77TH COURT	<input type="checkbox"/> Add
		MIAMI, FL 33122	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED
 2018 FEB - 3rd
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
 Add
 Remove
 Change

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

THIS LIMITED LIABILITY COMPANY SHALL BE A "MANAGER-MANAGED LIMITED
LIABILITY COMPANY"

Multiple horizontal lines for amending information.

E. Effective date, if other than the date of filing: JANUARY 15, 2016 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 FEBRUARY 2, 2016

Signature of a member or authorized representative of a member

ALEXIS GONZALEZ

Typed or printed name of signee

2016 FEB -3 A 10:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED