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### **COVER LETTER**

_	ision of Cor			
SUBJECT:	Boca Isles	South, LLC		
SOBSECT.		Name of Lim	ited Liability Company	<del></del>
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Steven Adelson		
			Name of Person	
			Firm/Company	<del> </del>
		2847 Banyan Blvd Cir NW	V	
			Address	<del></del>
		Boca Raton, FL 33431		
			City/State and Zip Code	
		steven.r.adelson@gmail.com		
		E-mail address: (	to be used for future annual report notifi	cation)
For further in	nformation co	oncerning this matter, please ca	all:	
Steven Adel	son		561 319-5265 at ()	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a	check for th	ne following amount:		
□ \$25.00 F	iling 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

Boca Isles South, LLC					
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our recordiability Company)	<u>ds.</u> )			
The Articles of Organization for this Limited Liability Company Florida document number L16000010677	were filed on Jan 15, 2016	and assigned			
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	ility company here:				
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLG	C" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	2847 Banyan Blvd Cir NW				
(Principal office address MUST BE A STREET ADDRESS)	SS) Boca Raton, FL 33431				
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here  Name of New Registered Agent:	fice address on our record	Is, enter the name of the new			
New Registered Office Address:					
	Enter Florida street address				
<del></del>	, F	lorida			
	City	гір Соае			

## 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>	Type of Action
AMBR	Steven Adelson	2847 Banyan Blvd Cir NW	
		Boca Raton, FL 33431	□ Remove
			■ Change
			□ Add
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f an effective d <b>Note:</b> If the	te, if other than the late is listed, the date in date in this offective date on the	nust be specific and block does not a	d cannot be prior t meet the applica	o date of filing or	(op more than 90 days at ing requirements, t	fter filing.) Pursua	ant to 605.020 ot be listed a
ne record s The 90th	pecifies a delay day after the re	red effective of ecord is filed.	date, but not	an effective	time, at 12:0	La.m. on th	e earlier (
Dated	Jan	3	, 2017		ve of a member		
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Filing Fee: \$25.00