Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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(((H17000159228 3)))



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Help

S. WARREN JUN 1 9 2017

ARTICLES OF AMENDMENT TO

H17000159228

ARTICLES OF ORGANIZATION

	~-		
- MKEOS	954	LLC	
(Name of the Limited L.) (A.F.)	ability Company as it now appea orida Limited Liability Company)	irs on our records.	
Q.	,	eddda.	
The Articles of Organization for this Limited Liabili	ty Company were filed on _	ar	nd assigned
Florida document number <u>L16000</u>	5208	1 '	
Torrest document married			
This amendment is submitted to amend the followin	g:		
A T6	V		
A. If amending name, enter the new name of the	nmited habinty company n	<u>lere</u> :	
The new name must be distinguishable and contain the words	"Limited Liability Company," the	designation "LLC" or the abbreviation	on "L.L.C."
Enter new principal offices address, if applicable	•		
(Principal office address MUST BE A STREET A)	<u> </u>		
		_ 	
Enter new mailing address, if applicable:		<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX	0		
	-	至	17
B. If amending the registered agent and/or r	o searbhe eartha harateine		
registered agent and/or the new registered office		out tecords, Enter the in	<u>~~</u> 1
		mg	3 C
NT-11 CN1 11-70 Cn2 SA-11-4		三公	- - - -
Name of New Registered Agent:			
New Registered Office Address:		5~	ယ
	Enter Flo	orida street address	
		, Florida	
_	City		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

Page 1 of 3

MGR = Manager

□ Remove

☐ Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR = Authorized Member <u>Title</u> <u>Name</u> <u>Address</u> Type of Action JOSE MAURICIO 48 Add Ft. Lauderdale FL 3330 ☐ Change □ Add □ Remove ☐ Change DbA □_ □ Remove ☐ Change □ Add ☐ Remove ☐ Change \square Add Remove Change

06/16/2017	15:31	3052201440	LAZARUS	PAGI	E 04
If amending	any othe	r information, enter chang	e(s) here: (Attach additional sheets, ij	f necessary.)	
					
<u> </u>					
					
					
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	_ 				
If an effective d Note: If the (ate is listed, late inserte	r than the date of filing:, the date must be specific and canned in this block does not meet the on the Department of State's	ot be prior to date of filing or more than 90 days he applicable statutory filing requirement	(optional) s after filing.) Pursuant to 605 s, this date will not be liste	.0207 (ed as i
ne record s The 90th	pecifies day afte	a delayed effective date, or the record is filed.	but not an effective time, at 12:	1-51 <u>-</u>	er of
Dated	6/	14	2017	FILE IUN 16 (G TAR) AHASSE	
_		Signature of a memb	egor authorized representative of a member	ED RED	
		RENZO	Moretti d or printed name of signee		

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