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COVER LETTER

TO: Registration Secti Division of Corpo			,
SUBJECT: MILLBU	RY 63 LLC		·
	Name of Limi	ited Liability Company	
The enclosed Articles of An	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspond	ence concerning this matter	to the following:	
		•	
	AN	NY LUGO	
		Name of Person	
	L2 P	PARTNERS LLC	
		Firm/Company	
	1790	CORAL WAY, 1ST FLOOR	조절 하
		Address	
			977 € 227 N
,	MIA	MI, FL 33145 City/State and Zip Code	
	ANN	Y,LUGO@L2PARTNERS.COM	
		to be used for future annual report notific	ution) 💥 ম 🗭
For further information con-	cerning this matter, please ca	dI:	第三 3 3 3
ANNY LUGO		at (786) 400 - 3	3184
Name of P	erson	at (<u>786</u>) <u>400 - </u>	8184 Clephone 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)
	G ADDRESS:	STREET/COURIE Registration Section	R ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO ARTICLES OF ORGANIZATION OF

MILLBURY 63 LLC (Name of the Limited Liability Company as it now appears on our records.)
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Liability Company were filed on and assigned and assigned
Florida document number <u>116000131411</u> .
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
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:
registered agent and/or the new registered office address nere.
Name of New Registered Agent:
New Registered Office Address: Enter Florida street address
El anida
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

If Changing Registered Agent, Signature of New Registered Agent

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.

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	AMR RAJADHYAKSHA	5140 RIVIERA DRIVE	
		CORAL GABLES, FL 33146	⊠ Remove
			Change
MGR	RAJ REAL ESTATE LLC	5140 RIVIERA DRIVE	⊠ Add
		CORAL GABLES, FL 33146	Remove
			Change
_AMBR	NA ABDULLAH HOLDINGS LLC	450 ALTON ROAD STE 2501	_ X Add
		MIAMI BEACH, FL 33139	□ Remove
			Change
			☐ Add
			Change
			Change
		-,	Add
			☐ Remove
			□ Change

		
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		<u>원</u> 명
		일본 기계
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f an effective date Note: If the date	of other than the date of filing: is listed, the date must be specific and cannot be prior to date of filing or me inserted in this block does not meet the applicable statutory filing tive date on the Department of State's records.	(optional) nore than 90 days after filing.) Pursuant to 605.020 g requirements, this date will not be listed as
	cifies a delayed effective date, but not an effective t y after the record is filed.	time, at 12:01 a.m. on the earlier o
Dated	JULY 25 2016	
	Signiture of a member or authorized representative	e of a member
	Charl roug)

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Filing Fee: \$25.00