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ANDREW M. DARLINGTON DIRECT DIAL: (305) 777-6045 E-MAIL: <u>adaclingtonid wargotrench com</u>

October 5, 2021

#### Via Federal Express

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe St., Suite 810 Tallahassee, FL 32303

Re:

118 West 4, LLC

Florida Document No. L# 16000135891

To whom it may concern:

In connection with the above-referenced business entity, we are requesting the filing of the following documents:

- 1. Amendment to Articles of Organization of 118 West 4, LLC (cover letter and check No. 942 in the amount of \$60.00, payable to: Florida Department of State also enclosed), and
- 2. **Statement of Authority** (cover letter and check No. 941 in the amount of \$55.00, payable to: Florida Department of State also enclosed).

Please return a copy of the filings to our office at: Wargo French, LLP, c/o Andrew Darlington, Esq., 201 S. Biscayne Blvd., Suite 1000, Miami, Florida 33131. If you have any questions regarding the enclosed documents, please do not hesitate to contact me directly.

Sincerely,

\_/s/ Andrew M. Darlington

Andrew M. Darlington

AMD/EAB Enclosure

### **COVER LETTER**

TO:	Registration So Division of Cor			
SUBJI	118 West 4	LLC		
SUBJI		Name of Lin	nited Liability Company	<del>.</del>
		Amendment and fee(s) are sub	-	
riease	return an correspo	ondence concerning this matter	to the following:	
		Vivian Chou, Esq.		
			Name of Person	
		The Law Offices of Vivian	n Chou, PA	
			Firm/Company	
		PO Box 562230		
			Address	<del></del>
		Miami, FL, 33256-2230		
		VChou@bellsouth.net	City/State and Zip Code	
		E-mail address: (	to be used for future annual report notif	lication)
For fur	ther information co	oncerning this matter, please co	att:	
Vivian	Chou, Esq.		305 238-3341	
Name of Person		at () Area Code Daytimo	: Telephone Number	
Enclose	ed is a check for th	ne following amount:		
□ \$2:	5.00 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 Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

Name of the Lim	ited Liability Company as it now appears of (A Florida Limited Liability Company)	n our records.)
The Articles of Organization for this Limited I Florida document number <u>L16000135891</u>	Liability Company were filed on July	19, 2016 and assigned
This amendment is submitted to amend the fol	llowing:	
A. If amending name, enter the new name	of the limited liability company here	
The new same must be distinguishable and contain the	words "Limited Liability Company," the design	gnation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if appli	icable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE	<u></u>	
B. If umending the registered agent and/or agent and/or the new registered office addr		ords, enter the name of the new registe
Name of New Registered Agent:	Vivian Chou, Esq.	
New Registered Office Address:	1104 Pance De Lean Blvd	
	P . P . 1	i street address
	Enler Florik	The critical to

#### 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. Thereby confirm that the limited liability company has been notified in writing of this change.

Cin

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>	Name	Address	Type of Action
CEO	Justin Campbell	85 Palm Avenue	
		Miami Beach, FL, 33139	■Remove
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			□ Remove
			∷3 ∴ ⊟Change
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			□Remove

be, a member, manager, or agent of 118 West 4, LLC; (2) does not own and has never owned any interest in 118						
West 4, LLC; and (3) has no authority (as actual agent.	West 4, LLC; and (3) has no authority (as actual agent, apparent agent, or otherwise) to act on behalf of 118 v					
4, LLC. Any and all filings Justin Campbell has purpo	orted to make in	the past or may i	n the future	make a	re false	
and, thus, void.						
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tive date, if other than the date of filing:  Tective date is listed, the date must be specific and cannot be pride lift the date inserted in this block does not meet the appoint seffective date on the Department of State's record	for to date of filing dicable statutory	g or more than 90 d	_ <b>(optiona</b> l ays after filin nts. this dat	g.) Pursu	nant to 60	
ord specifies a delayed effective date, but not an effective filed.	e time, at 12:01	a.m. on the earlic	er of: (b) T	he 90th	day afi	
September 21 2021	-1					