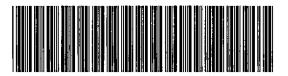
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COVER LETTER

TO: Registration Sec Division of Corp		
SUBJECT:	PRITAGE ELEGANTE LLC Name of Limited Liability Company	
The enclosed Articles of A	mendment and fee(s) are submitted for filing.	
Please return all correspon	lence concerning this matter to the following:	
	ROBERT GARTH MORBACH	
	Name of Person	
	Division of Corporations T: HERITAGE ELEGANTE LLC Name of Limited Liability Company Division of Corporations The second Articles of Amendment and fee(s) are submitted for filing. The second Articles of Amendment and fee(s) are submitted for filing. The second Articles of Amendment and fee(s) are submitted for filing. The second ARTH MORBACH Name of Person HERITAGE ELEGANTE LLC Firm/Company 15981 SW 96 TERRACE Address MIAMI FLORIDA 33196 City/State and Zip Code Fabert morbach abells outh. net E-mail address: (to be used for future annual report notification) er information concerning this matter, please call: 8ERT 6. MORBACH Name of Person Table 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	Name of Limited Liability Company diment and fee(s) are submitted for filing. e concerning this matter to the following: ROBERT GARTH MORBACH Name of Person HERITAGE ELEGANTE LLC Firm/Company 15981 SW 96 TER RACE Address MIAMI FLORIDA 33196 City/State and Zip Code Chert morbach abell-south net E-mail address: (to be used for future annual report notification) ting this matter, please call: MORBACH at 305 904-1092 Area Code Daytime Telephone Number Dowing amount: \$30.00 Filing Fee & Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed)	
	IECT: HER ITAGE ELEGANTE LLC Name of Limited Liability Company enclosed Articles of Amendment and fee(s) are submitted for filing. The return all correspondence concerning this matter to the following: ROBERT GARTH MORBACH Name of Person	
	Address	Name of Limited Liability Company and fee(s) are submitted for filing. PROPERT GARTH MORBACH Name of Person ERITAGE ELECANTE LLC Firm/Company 5981 SW 96 TERRACE Address NIAMI FLORIDA 33196 City/State and Zip Code Pert morbach abell south. net E-mail address: (to be used for future annual report notification) s matter, please call: RBACH at 305 904-1092 Area Code Daytime Telephone Number amount: Filing Fee & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
	MIAMI FLORIDA 33196	
	E-mail address: (to be used for future annual report notification)	
ROBERT G	MORBACH at 305 904-1092	
Name of	'erson Area Code Daytime Telephone Number	
Enclosed is a check for the	following amount:	
\$25.00 Filing Fee	Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy Certified Copy	

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

HERITAGE ELEGANTE LLC

(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 C Florida document number <u>L16000141</u>	Company were filed on $\frac{\checkmark}{24}$	04927,2016 and assignment	gned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ited liability company he	<u>re</u> :	
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the de	esignation "LLC" or the abbreviation "L.L.	.C."
Enter new principal offices address, if applicable:		A S	÷
(Principal office address MUST BE A STREET ADDR	RESS)		. 1
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	-,, ,, ,	7, 10 10 11 7, 10 10 11	
Enter new mailing address, if applicable:		المناف	i } - j
(Mailing address MAY BE A POST OFFICE BOX)		984 2 124 2	H Bon
Manufacture and the second sec].	
Name of New Registered Agent:			
New Registered Office Address:	C	• 3	
	Enter Flori	ida street address	
	City	, Florida Zip Code	····
New Registered Agent's Signature, if changing Registered	•	Zip Coue	
		n en a	1.1 .1
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and of accept the obligations of my position as registered ag being filed to merely reflect a change in the registere company has been notified in writing of this change.	omplete performance of gent as provided for in C ed office address, I hereb	my duties, and I am familiar with hapter 605, F.S. Or, if this docun	and nent is
	If Changing Registered Ag	ent, 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:

	Manager Authorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	EMMA MORBACH	15981 SW 96 TERR	_ DF Add
		MIAMI, FLA 33196	□ Remove
			Change
MOR		12905 SW 207 LAN	
		MIAMI, FLA 32177	□ Remove
			Change
			□ Add
			_□ Remove
			_□ Change
			_□ Add
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Typed or printed name of signee

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