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SEGRETARY, OF STATES

COVER LETTER

TO: Registration Division of C				
3900 Loc	quat LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.		
Please return all corres	pondence concerning this matter	to the following:		
	Alfredo D Xiques			
		Name of Person		
	Garcia & Xiques, PA			Fo
		Firm/Company		L CK
	2950 SW 27th Ave, Suite	100	16 OCT 25	S.H.
		Address	(J)	355
	Miami, FL 33133		8h :t Hd	NHASSEE, TEORIOR
		City/State and Zip Code	£8	
	axiques@rptgfla.com E-mail address: (to be used for future annual report notif	cation)	
For further information	n concerning this matter, please c		Cu	
Alfredo Xiques	, , , , , , , , , , , , , , , , , , ,	305 358-4800		
	e of Person	at ()	Telephone Number	
Enclosed is a check for	r 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)	
	ILING ADDRESS: stration Section	STREET/COURII Registration Section		

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

3900 Loquat LLC		
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our rec Liability Company)	ords.)
The Articles of Organization for this Limited Liability Company	were filed on July 29, 2016	and assigned
Florida document number L16000141463		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company "the designation "I	1 C" or the abbreviation "1 1 C"
Enter new principal offices address, if applicable:	3900 Loquat Ave	DE OF THE ADDITIONAL E.F.C.
(Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33133	SE SE
		8 47
Enter new mailing address, if applicable:	3900 Loquat Ave	ASSEE 1 25 1
(Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 33133	¥ 70
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		rds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street add	lress
		Florida
New Registered Agent's Signature, if changing Registered Agent:	City	Zip Code
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete	ee to act in this capacity. I	further agree to comply with the and I am familiar with and

If Changing Registered Agent, Signature of New Registered Agent

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 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>	Address	Type of Action
MGRM	3600 Hibiscus LLC	255 University Drive	Add
		Coral Gables, FL 33134	
			Change
			Removed Strict AHASSEE TARY OF STANDARD AND AND AND AND AND AND AND AND AND AN
			Remove Change
			□ Remove
			☐ Change
			Add
			□ Remove
			Change
			Add
			□ Remove
			□ Change

Lointer South, LLC shall be the	ne sole member and manager of th	ie Company. 3600 Hibiscu	s, LLC shall be removed
as a Member and a Manager a	s of the date of the filing of this a	mendment.	
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ive date, if other than the offective date is listed, the date must. If the date inserted in this blo nent's effective date on the De	be specific and cannot be prior to date ck does not meet the applicable st	of filing or more than 90 days	optional) after filing.) Pursuant to 605. this date will not be listed
cord enocifies a delact-d	officiality of the but and a	affa abi bi 40	Od a man and the second
e 90th day after the reco	effective date, but not an ord is filed.	enective time, at 12:	ur a.m. on the earlie
October 21	, 2016		
	Signature of a member or authorized	representative by member	<u>, </u>
<i> </i>	\ /	// // //	

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Filing Fee: \$25.00