L16000146160

Florida Department of State

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AUG 24 2016

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H160002087103

(Name of the Limited Liability Company were filed on	CROWN PUBLICATION	NS LLC				
Florida document number L16000146160 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 "LLC." Enter new principal offices address, if applicable: 1401 SE 9th Street (Crincipal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: Fort Lauderdale, FL 33316 Enter new mailing address, if applicable: Fort Lauderdale, FL 33316 Enter new mailing address, if applicable: Fort Lauderdale, FL 33316 Enter new mailing address MAY BE A POST OFFICE BOX) Fort Lauderdale, FL 33316 Enter leaderdale, FL 33316 Enter leaderdale, FL 33316 Enter Florida street address on our records, enter the name of the neregistered agent and/or the new registered office address here: Name of New Registered Office Address: 1401 SE 9th Street Enter Florida street address Fort Lauderdale Enter Florida street address Fort Lauderdale City 7 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 familiate with and except the ability of 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.	(Name of the Limit	ed Liability Compa (A Florida Limited I	ny as it now appears on our liability Company)	records.)		
The new name must be distinguishable and contain the words "Limited Hability Company here: 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) Enter new mailing the registered agent and/or registered office address on our records, enter the name of the negestered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: 1401 SE 9th Street Fort Lauderdale, FL 33316 Enter Florida street address Fort Lauderdale New Registered Agent: New Registered Office Address: 1401 SE 9th Street Enter Florida street address Fort Lauderdale (City Florida 33316 Zip Code Niew Registered Agent's Signature, if changing Registered Agents: 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 recept 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 affice address, I hereby confirm that the limited liability company has been notified in writing of this change. If Changing Registered Agent, Signature (Agent Signature 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.		ability Company	were filed on 06/15/20	and assigned		
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, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Enter new mailing the registered agent and/or registered office address on our records, enter the name of the neregistered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: 1401 SE 9th Street	This amendment is submitted to amend the following	owing:				
Enter new principal office 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) Enter new mailing the registered agent and/or registered office address on our records, enter the name of the neregistered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: 1401 SE 9th Street Fort Lauderdale, FL 33316 Enter Florida street address Fort Lauderdale Fort address on our records, enter the name of the neregistered agent and office address here: 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 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.	A. If amending name, enter the new name of	the limited liab	ility company here:	•		
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Page 1 of 3	provisions of all statutes relative to the proper accept the obligations of my position as regis being filed to merely reflect a change in the r	er and complete stered agent as pegistered office change. If Chan	performance of my dustrovided for in Chapter address, I hereby conf ging Registered Agent, <u>Sie</u>	nies, and I am familiar with and 605, F.S. Or, if this document is irm that the limited liability		

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

H1600020871.03

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Herskowitz, Howard	1401 SE 9th Street	🗀 Add
		Fort Lauderdale, FL 33316	☐ Remove
			■ Change
			Add
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If the date inserted in this block does not ment's effective date on the Department of St	est the applicable state	itory filing requi	rements, this da	te will not be list
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cord specifies a delayed effective de 90th day after the record is filed.	ate, but not an eff	fective time,	at 12:01 a.m	i. on the earli
. Sour day diter the record is med.				
August 23	2016			
<i></i>			े स्वास् विक्रमण	
Signature of a m	ember or authorized rep	resentative of a me		emigration of the contract of
			WRY WSSE	3 [

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