## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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: (850)617-6383

From;

Account Name : FELDMAN & ASSOCIATES

Account Number : I20130000018 Phone : (786)288-5699

Fax Number : (866)856-1462

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: paul@feldmanclosings.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN URBAN CORE CAPITAL, LLC

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2016-09-22 14:54 Feldman & Associates

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

URBAN CORE C	APITAL, LLC		
(Name of the Limited Liability Com (A Florida Limite	pany as it now appeared Liability Company)	irs on our records.)	<del></del>
The Articles of Organization for this Limited Liability Compa	ny were filed on	08/25/2016	and assigned
Florida document number <u>L16000159020</u> .			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	ability company b	iere:	
The new name must be distinguishable and contain the words "Limited Lin	bility 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)			· · · · · · · · ·
	<del></del>		<u> </u>
B. If amending the registered agent and/or registered	nMen address o	n our records, entr	r the name of the new
registered agent and/or the new registered office address h		u our records, <u>circ</u>	
			9: 2
Name of New Registered Agent:			#6 <b>6</b>
New Registered Office Address:			
	Enter Flo	orida street address	
		, Florida	
	Cłţy		Zip Code

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, I hereby confirm that the limited liability company has been notified in writing of this change.

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
MGR	Cyrus Mehrpouyan	2133 N MERIDIAN AVE	
		MIAMI BEACH, FL 33139	□ Remove
			☐ Change
MGR	Robert Rudman	2133 N MERIDIAN AVE	<b>S</b> Add
		MIAMI BEACH, FL 33139	□ Remove
			Change
<del></del>			
			□ Remove
			☐ Change
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			Change C
			□ Remove
			□ Change
			Remove
			☐ Change

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	5. 01	
E. Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to date of filin  Note: If the date inserted in this block does not meet the applicable statutor, document's effective date on the Department of State's records.	(optional) g or more than 90 days after filing.) Pursuant to 605.0. y filing requirements, this date will not be listed	207 (3) as the
f the record specifies a delayed effective date, but not an effect b) The 90th day after the record is filed.	live time, at 12:01 a.m. on the earlier	of:
Dated September, 21st 2016	7	
Paul Feld	luar	
Signature of a member or authorized represen	nutive of a member	
Paul Feldman, Esq.		
Typed or printed name of sig	nee	

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