

11/20/2017 13:05
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L16000183940

From: 9858517588 Meland Russin
Division of Corporations

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Florida Department of State
Division of Corporations
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To:

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From:

Account Name : MELAND RUSSIN & BUDWICK, P.A.
Account Number : I20040000113
Phone : (305)358-6363
Fax Number : (305)358-1221

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

Email Address: CRAMOS@MELANDRUSSIN.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
1025 W 47TH STREET LLC

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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S. WARREN

NOV 20 2017

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

1025 W 47TH STREET 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 Company were filed on OCTOBER 3, 2016 and assigned
Florida document number L16000183940.

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 "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)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City, Florida 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. ~~OF~~ 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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	ANDREW SASSON	PO BOX 398805	<input checked="" type="checkbox"/> Add
		MIAMI BEACH, FL 33239	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MICHELLE MUENCH	PO BOX 398805	<input type="checkbox"/> Add
		MIAMI BEACH, FL 33239	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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MIAMI BEACH, FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _____ (optional)

Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) of the Rules of the Commission, the date of filing of this document shall be the date of filing for purposes of the filing requirements. This date will not be listed as the

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

Dated NOVEMBER 20, 2017

Signature of a member or authorized representative of a member

MARK S. MELAND

Typed or printed name of signee

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