# L16000202442

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### Sunshine State Corporate Compliance Company

## 3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 06/11/2021			**WALK IN**
ENTITY NAME 80	25 APARTMENTS		W FLEX
ENTITY NAME 00	207117111111111111111111111111111111111		
DOCUMENT NUMB	ER		
	**PLEASE FILE THE	ATTACHED AND RETURN**	
xxxxxx	Plain Copy		**WALK IN
<del></del>	Certified Copy		
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	**APOSTILLE' / NO	TARIAL CERTIFICATION**	
COUNTRY OF DEST NUMBER OF CERTI	TINATION FICATES REQUESTED	·	_
TOTAL OWED \$25	5.00	ACCOUNT #: I2016000007	2 , ,
DA AA T.			
Please call lina	at the above number for a	ny issues or concerns. <b>Thank you</b> s	o much!

#### **COVER LETTER**

ision of Corp	tion orations					
8025 APAR	TMENTS LLC					
	Name of Lin	nited Liability Com	pany			<del></del>
Articles of A	mendment and fee(s) are sub-	omitted for filing.				
all correspon	dence concerning this matter	to the following:				
	GRYSKA SOTOLONGO					
	- ,1 - , ,,	Name of Pe	rson	· · · · · · · · · · · · · · · · · · ·		<del> </del>
	THOMAS G. SHERMAN	, P.A.				
		Firm/Comp	any			
	90 ALMERIA AVENUE					
		Address				
	CORAL GABLES, FL 33	134				
		City/State and Z	ip Co	de	-	
						<u> </u>
formation cor			e anni	ual report notifi	cation)	
TOLONGO				448-5898		
Name of F	erson	Area C	ode	Daytime	Telepho	ne Number
check for the	following amount:					
ling Fee	S30.00 Filing Fee & Certificate of Status	Certified (	Гору			S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
sion of Cor Box 6327	porations	ส บ T	egis livis he C	tration Sect ion of Corp Centre of Ta	oratio: llahas	see
	Articles of A all correspon  TOLONGO  Name of F  check for the ling Fee  stration Session of Corr Box 6327	Articles of Amendment and fee(s) are substituted all correspondence concerning this matter.  GRYSKA SOTOLONGO  THOMAS G. SHERMAN  90 ALMERIA AVENUE  CORAL GABLES, FL 33  GRYSKA@UNIONTITLE  E-mail address: (formation concerning this matter, please of the following amount: the formation the following amount:	Articles of Amendment and fee(s) are submitted for filing.  Articles of Amendment and fee(s) are submitted for filing.  all correspondence concerning this matter to the following:  GRYSKA SOTOLONGO    Name of Perform	Articles of Amendment and fee(s) are submitted for filing.  Articles of Amendment and fee(s) are submitted for filing.  all correspondence concerning this matter to the following:  GRYSKA SOTOLONGO  Name of Person  THOMAS G. SHERMAN, P.A.  FirmvCompany  90 ALMERIA AVENUE  Address  CORAL GABLES, FL 33134  City/State and Zip Co  GRYSKA@UNIONTITLESERVICES.COM  E-mail address: (to be used for future anni formation concerning this matter, please call:  TOLONGO  Name of Person  Area Code  Check for the following amount:  ling Fee S30.00 Filing Fee & S55.00 Filing Fe  Certificate of Status  Certified Copy (additional copy is  sing Address: Street Stration Section  Regis Sirnet Original Street Sir	Name of Limited Liability Company  Articles of Amendment and fee(s) are submitted for filing.  all correspondence concerning this matter to the following:  GRYSKA SOTOLONGO  Name of Person  THOMAS G. SHERMAN, P.A.  Firm/Company  90 ALMERIA AVENUE  Address  CORAL GABLES, FL 33134  City/State and Zip Code  GRYSKA@UNIONTITLESERVICES.COM  E-mail address: (to be used for future annual report notification concerning this matter, please call:  TOLONGO  Name of Person  Area Code  Daytime  Check for the following amount:  Ing Fee S30.00 Filing Fee & Certificate of Status  Certificate of Status  Certificate Copy (additional copy is enclosed)  Ing Address:  Street Address:  Street Address:  Stration Section  Registration Section  Sion of Corporations  Box 6327  The Centre of Ta	Articles of Amendment and fee(s) are submitted for filing.  all correspondence concerning this matter to the following:  GRYSKA SOTOLONGO  Name of Person  THOMAS G. SHERMAN, P.A.  Firm/Company  90 ALMERIA AVENUE  Address  CORAL GABLES, FL 33134  City/State and Zip Code  GRYSKA@UNIONTITLESERVICES.COM  E-mail address: (to be used for future annual report notification)  formation concerning this matter, please call:  TOLONGO  Name of Person  TOLONGO  Name of Person  Street Address:  Street Address: Stration Section Sion of Corporations Box 6327  The Centre of Tallahas  Firm/Company  Address:  Registration Section Division of Corporation The Centre of Tallahas

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

8025 APARTMENTS LLC

(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)				
The Articles of Organization for this Limited Liability Company					
Florida document number L16000202442					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	pility company here:				
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbreviation "L.L.C."				
Enter new principal offices address, if applicable:	936 SW 1st Avenue				
(Principal office address MUST BE A STREET ADDRESS)	Suite # 254				
	Miami, FL 33130				
Enter new mailing address, if applicable:	936 SW 1st Avenue				
(Mailing address MAY BE A POST OFFICE BOX)	Suite # 254				
	Miami, FL 33130				
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	address on our records, enter the name of the new registered  Enter Florida street address				
	, Florida				
	, Florida				
New Registered Agent's Signature, if changing Registered Agent:					
I hereby accept the appointment as registered agent and agreprovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is address, I hereby confirm that the limited liability				

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
AMBR	D3 Holdings LLC	936 SW 1st Avenue, Suite # 254	<b>∃</b> Add
		Miami, FL 33130	□Remove
			Change
AMBR COINCO INVESTMENT COMPA	COINCO INVESTMENT COMPA	844 SW 1ST AVENUE	□Add
	MIAMI, FL 33130	≣Remove	
			Change
			□Remove
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<u>te:</u> If	late, if other than the date of filing:
umen	effective date on the Department of State's records.
cord s s tiled	cifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
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ted	Signature of a member or authorized representative of a member