## 11600214541

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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	



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03/30/17--01019--027 \*\*25.00

FILED

17 MAR 30 PH 3-19
SECRETARY OF STATE
SECRETA

Office Use Only

D. SCOTT MAR 3 1 2017

## **COVER LETTER**

TO:	Registration Se Division of Cor				
CUD IE		JILDING UM LLC			
SUBJEC	∪1:	Name of Lim	ited Liability Company		
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	eturn all correspo	ondence concerning this matter	to the following:		
		GREG HERSKOWITZ			
		-	Name of Person		
		GREG HERSKOWITZ P.	Α.		
			Firm/Company		
	9100 S. DADELAND BLVD., SUITE 908 Address				
		MIAMI, FL 33156			
			City/State and Zip Code	<u> </u>	
		greg@hlfmiami.com	o be used for future annual re	port notification)	
For furth	er information c	oncerning this matter, please c		port notification,	
		oneering in maner, preuse e	305 423-	1259 H	SE
———	HERSKOWITZ	f Person	at () Area Code	Daytime Telephone Number	绿毒亚
	Name o	i reison	Area Coue	Daytime Telephone Number	FILED B 30 PL
Enclosed	d is a check for th	ne following amount:			
\$25.	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sed) \$60.00 Filing Certificate of Certified Cop (additional copy	Fee Status & G
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section on of Corporations ox 6327 assee, FL 32314	Registratio Division of Clifton Bui	Corporations	

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

records.)
and assigned
on "LLC" or the abbreviation "L.L.C."
records, enter the name of the new

## 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 = A	Authorized Member		
<u>Title</u>	Name	Address	Type of Action
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			□ Remove
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ective date, if other than the done effective date is listed, the date must be. If the date inserted in this block burnent's effective date on the Dep	e specific and cannot be k does not meet the	e prior to date of fili applicable statuto	ng or more than 90 day ry filing requirement	s after filing.) Pursu	ant to 605.02 ot be listed a
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record specifies a delayed he 90th day after the reco	effective date, b d is filed.	ut not an effec	tive time, at 12:	01 a.m. on th	je earlier
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Page 3 of 3

Filing Fee: \$25.00