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(R	equestor's Name)	
(A	ddress)	
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(C	ity/State/Zip/Phone #)	
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COVER LETTER

Division o					
	THEAS	T LAND DEVELOPMENT	GROUP, LLC		
SUBJECT:		Name of Lim	ited Liability Company		
The enclosed Artic	les of A	mendment and fee(s) are sub-	mitted for filing.		
		dence concerning this matter			
		RODRIGO KIRILAUSCA	s		
			Name of Person		
		SOUTHEAST LAND DEV	VELOPMENT GROUP, LLC		
			Firm/Company	-	
		13364 SW 128TH ST			
			Address	_	
		MIAMI, FL 33186			FILE 30 FH 3:50
			City/State and Zip Code		8
		RODRIGO@KNAREALTY			至
			to be used for future annual report no	tification)	(A)
For further informa	ation cor	ncerning this matter, please ca	all:		6
RODRIGO KIRIL	.AUSC	\S	305 244-7481		
,	Name of 1	Person	Area Code Daytir	me Telephone Number	
Enclosed is a check	k for the	following amount:			
■ \$25.00 Filing 1	Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &
ŀ	Registrat	NG ADDRESS: tion Section of Corporations	STREET/COUR Registration Secti Division of Corpo		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FI. 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SOUTHEAST LAND DEVELOPMENT GRO		
(<u>Name of the Limited Liability</u> (A Florida I.	Company as it now appears on our records.) Jimited Liability Company)	
The Articles of Organization for this Limited Liability Con	mpany were filed on 11/30/2016	and assigned
Florida document number L16000217156	٠.	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRE	<u> </u>	
		
Enter new mailing address, if applicable:		
5		8
(Muiling address MAY BE A POST OFFICE BOX)	· 	<u> </u>
		ယ္
B. If amending the registered agent and/or registeregistered agent and/or the new registered office addre	red office address on our records, ess here:	enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Flori	ida
	City	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

Title Name Address		Type of Action		
MGR	CHRISTOPHER FORRY	13364 SW 128 ST, MIAMI, FL	add	
		33186	Remove	
			☐ Change	
			Add	
			□ Remove	
			□ Change	
				
			Remove	
			Change To Add To D	
			Add P	
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Effective date, if other than the of an effective date is listed, the date must Note: If the date inserted in this blodocument's effective date on the De	specific k does no	and cannot of muct the	: applicabl	late of filing e statutory	or more that	n 90 days afte	ional) er filing.) Pu is date wil	irsuant to 60: I not be list	5.0207 (3) ed as the
ne record specifies a delayed The 90th day after the reco			out not a	in effecti	ve time,	at 12:01	a.m. on	the earli	er of:
Dated August 22nd		2017	7 						
			3						
		#				ember			

Page 3 of 3

Filing Fee: \$25.00