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SECRETARY OF STATE

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COVER LETTER

Div	ision of Corp	oorations		
AND ID CT		INTE INVESTMENTS LLC		
SUBJECT:		Name of Limi	ted Liability Company	
The enclosed	Articles of A	Amendment and fee(s) are sub-	nitted for filing.	
Please return	all correspor	ndence concerning this matter (to the following:	
		MICHAEL I BERNSTEIN		
			Name of Person	
		THE BERNSTEIN LAW F	TRM	
			Firm/Company	
		3050 BISCAYNE BOULE	VARD, SUITE 403	
			Address	
		MIAMI, FL 33137		
		MICHAEL@BERNSTEIN-		
		E-mail address: (t	to be used for future annual report notific	ation)
For further i	nformation co	oncerning this matter, please ca	all:	
MICHAEL	I BERNSTEI	N	305 672-9544 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is	a check for th	e following amount:		
\$25.001	Filing Fec	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

TO:

Registration Section

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2018 NOV 28 PM 4: 22

SECRETARY OF STATE TALLAHASSEE, FL

SOUTH POINTE INVESTMENTS 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 v Florida document number <u>L17000007885</u>	vere filed on 01/10/2017	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and contain the words "Limited Liability	y 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)		·····
(making undress MAT BE A 1 051 01 TKE BOA)		
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here Name of New Registered Agent:		ords, enter the name of the new
New Registered Office Address:		
ter registered office reduction.	Enter Florida street aa	dress
		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as po- being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties rovided for in Chapter 6	s, and I am familiar with and 05, F.S. Or, if this document is
If Chang	ging Registered Agent, <u>Signat</u>	ure 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>	Address	Type of Action
MGR	18 PLUS INC		□ Add
		1180 6TH AVE, 8TH FLOOR NEW YORK, NY 10036	■ Remove
			Change
MGR	RON GRANT	1180 6TH AVE, 8TH FLOOR NEW YORK, NY 10036	■ Add
			□ Remove
			☐ Change
			Add
			Remove
			Change
			Add
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an effective date is liste Note: If the date inse	ner than the date of f ad, the date must be specificated in this block does a date on the Department	ic and cannot be pri not meet the appl	or to date of fiting of t icable statutory fili	opt nore than 90 days after ng requirements, th	ional) r filing.) Pursuant to 605.02 is date will not be listed
e record specifies The 90th day af	s a delayed effecti ter the record is fi	ve date, but r led.	ot an effective	time, at 12:01	a.m. on the earlier
NOVEMBER 2	20	· 2018	7.1		
		Γ	1 (1		
	Signature	of a member or au	tiorized representativ	e of a member	

Page 3 of 3

Filing Fee: \$25.00