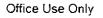
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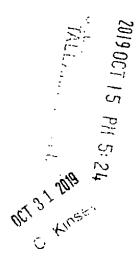
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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COVER LETTER

Div	ision of Cor	porations		r.e.
SUBJECT:	Franzblau T	rust Holdings-Frandan 235, Ll	LC	
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are sub-	mitted for filing.	•
Please return	all correspo	indence concerning this matter	to the following:	
		Gary Stiphany		
			Name of Person	
		Stiphany Law		
Firm/Company				
		80 SW 8 Street, Suite 3100)	
			Address	
		Miami, Florida 33130		
		gary@stiphanylaw.com	City/State and Zip Code	
		E-mail address: (I	to be used for future annual report notif	ication)
For further in	nformation c	oncerning this matter, please ca	ail:	
Steven Lippi	man		954 361-4560 at()	
	Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is a	check for th	ne following amount:		
■ \$25.00 F	iling Fee	☐ \$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)

MAILING ADDRESS:

Registration Section

TO:

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

Franzblau Trust Holdings-Frandan 2	235, LLC			
(Name of the Limite	ed Liability Company as it now appears on our records. (A Florida Limited Liability Company))		
The Articles of Organization for this Limited Lia		<u>.</u>	_ and ass	igned
Florida document number L17000010192	·			
This amendment is submitted to amend the follow				
A. If amending name, enter the new name of	the limited liability company here:			
Lesaga Holdings - 26 W 96 Street, LLC				
The new name must be distinguishable and contain the wo	ords "Limited Liability Company," the designation "LLC"	or the abbrev	viation L.	L.C."
Enter new principal offices address, if applica	able:		300.	i i
(Principal office address MUST BE A STREET	T ADDRESS)		<u>—</u>	• - •
	•	<u> </u>	D D	
		•	<u>က်</u>	***
Enter new mailing address, if applicable:		 -	رّب :	
(Mailing address MAY BE A POST OFFICE B	30X)			
B. If amending the registered agent and/o	or registered office address on our records,	enter the	name	of the
registered agent and/or the new registered offi	ice address here:			
Name of New Registered Agent:				
New Registered Office Address:	·			
1.10 W Rogistered Office Address.	Enter Florida street address		·	
	F12			
	City, Flori		ip 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 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 a or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
			Add
			□ Remove
			Change
			Change
			Remove
			☐ Change
		,	Remove
			Change
			
			Remove
			☐ Change
			D Add
			Remove
			Change

_	Attach additional sheets, if necessary.)
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(If an effect Note: If	e date, if other than the date of filing:
he reco The 9	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 0th day after the record is filed.
Dated	2019 , 2019
	Signature of a member or authorized representative of a member
	Mark Franzblau Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00