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Division of Corporations Fax Number : (850)61

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LLC AMNO/RESTATE/CORRECT OR M/MG RESIGN

SEY**C**O REAL ESTATE HOLDINGS , LLC

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FAX No.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



LII .	FI On t
SEYCO REAL ESTATE HOLDINGS, LLC	FLORIDA
All a series from the little Co	mpany as it now appears on our records.)
(A Flonds Lim	ited Liability Company)
The Articles of Organization for this Limited Liability Comp	pany were filed on 01/18/2017 and assigned
The Afficies of Organization for this Emilied Endomy	
Florida document number L17000014513	
This amendment is submitted to amend the following:	
	Rability assument have
A. If amending name, enter the new name of the limited	habinty company nere.
	WY CO. 1 all wining WT I C !!
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	520 BRICKELL KEY DR
(Principal office address MUST BE A STREET ADDRES.	S) #A1619
(Principal biffice address MOST HE STANGET MOST	MIAMI, FL 33131
I	520 BRICKELL KEY DR
Enter new mailing address, if applicable:	#A1619
(Mailing address MAY BE A POST OF FICE BOX)	
[G]	MIAMI, FL 33131
[6]	the second second
B. If amending the registered agent and/or register	ed office address on our records, enter the name of the new
registered agent and/or the new registered office address	z ilet c.
211. V27	OF ADDRESS
Name of New Registered Agents	OF ADDRESS
New Registered Office Address: 520 BRIC	KELL KEY DR #A1619
New Registered Office Address:	Enter Florida street address
Mami	City Florida 33131 Zip Code
	City Zip Code
New Registered Agent's Signature, if changing Registered A	gent:
New Registered Agent volgitations,	d garee to got in this canaciny. I further agree to comply with the
I hereby accept the appointment as registered agent und	d agree to act in this capacity. I further agree to comply with the splete performance of my duties, and I am familiar with and state provided for in Chapter 665, F.S. Or, if this document is
accept the obligations of my position as registered ager	it as provided for in Chapter 605, F.S. Or, if this document is
heing filed to merely reflect a change in the registered of	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

MGR = Manager

AMBR = Authorized Member

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	CHANGE OF ADDRESS	520 BRICKELL KEY DR	□ Add
		#A1619	Remove
		MIAMI, FL 33131	■ Change
ыGR	CHANGE OF ADDRESS	520 BRICKELL KEY DR	
		#A1619	■ Remove
		MLAMI, FL 33131	☐ Change
			☐ Remove
			Etange
			ZEARING FILL
			SSE

 	L: Remov
 	Change
 	Remov
 	☐ Change

DbA □

D. If amending any other infor	macion jenter	change(s) here	: (Attach additione	l sheets, if n	ecessary()	
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E. Effective date, if other than	the datgof fi	ling:		{0	ptional)	m 4'A-1 020
(If an effective date is listed, the date Note: If the date inserted in the document's effective date on the	is block does not be Department	and cannot be prior of State's records				
If the record specifies a dela (b) The 90th day after the	syed effectiv record is file	e date, but no ed.	ot an effective tir	ne, at 12:0	)1 a.m. on t	ne earlier :
Dated NOVEMBER 22		2017	·			
Dated	Mehulat S	enmen.	100000 saff #2 11(22/17 11:22-W ES 8(2-)-4(3)-4(3)-211	7		
<u> </u>	Signature	of a member or and	borized representative of			
MEHMET SEYMI						
	1811	Typed or prin	ted name of signee			