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COVER LETTER

Division of Cor	porations			
Boho Hunt	er II, LLC			
	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Alejandro Brito, Esq.			
	Name of Person			
	Zarco Einhorn Salkowski	& Brito, P.A.		
	Firm/Company			
	100 SE 2nd Street , Suite 2700			
	Address			
	Miami, Florida 33131			
		City/State and Zip Code	<u> </u>	
	abrito@zarcolaw.com			
For further information c	E-mail address: (concerning this matter, please of	to be used for future annual report notifiall:	cation)	
Alejandro Brito, Esq.	-	305 374-5418		
Name o	f Person	at () Area Code Daytime	Telephone Number	
Enclosed is a check for the	he following amount:			
□ \$25.00 Filing 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 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 ARTICLES OF ORGANIZATION **OF**

Bobo Hunter II. 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 were filed on February 3, 2017 __ and assigned Florida document number ______ L17000027299 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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) B. If amending the registered agent and/or registered office address on our records, enter the registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida Zin 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.

City

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Ana C. Faria	184 NW 27th Street	
		Miami. Florida 33127	Remove
			Change
AMBR Boho H	Boho Hunter Holding, LLC	184 NW 27th Street	🛱 Add
		Miami, Florida 33127	□ Remove
		 	□ Change
			Add
			□ Remove
		-	Change
			Add
			Remaxe Change Change Change Change Change Change
			R Rove
			□ Change
			_ □ Remove
			□ Change

If amendi	ng any other information, enter change(s) here: (Attach addi	•
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II an effectiv Note: If the	date, if other than the date of filing: the date is listed, the date must be specific and cannot be prior to date of filing or the date inserted in this block does not meet the applicable statutory fil s effective date on the Department of State's records.	
	f specifies a delayed effective date, but not an effective th day after the record is filed.	e time, at 12:01 a.m. on the earlier o
July Dated	2017	
	<u> </u>	
	Signature of a member or authorized representati	ive of a member
	Alejandro Brito	
	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00