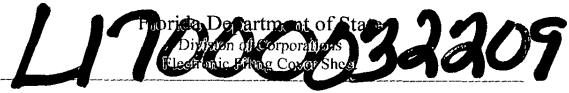
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Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : PADULA BENNARDO LEVINE, LLP

Account Number : I20160000061 Phone : (561)544-8900 : (561)544-8999 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: marisol@reelbuilders.net

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 850 SW. LLC

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ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

850 SW, LLC	•	•
(Name of the Lim	ted Liability Company as it now appe (A Florida Limited Liability Company	ears on our records.)
The Articles of Organization for this Limited I		February 9, 2017 and assigned
This amendment is submitted to amend the fol	lowing:	4
A. If amending name, enter the new name of	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 "L.L.C."
Enter new principal offices address, if appli	cable:	· ·
(Principal office address MUST BE A STRE	ET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)	
B. If amending the registered agent and registered agent and/or the new registered of	/or registered office address office address here:	on our records, enter the name of the new
Name of New Registered Agent:	Maria S. Williams	
New Registered Office Address:	215 NW 15th Street	
	Enter Fl	on our records, enter the name of the new or Florida street address Florida 33444 Zip Code
	Delray Beach	Florida 33444
	City	

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.

Page 1 of 3

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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	<u>Name</u>	Address	Type of Action
MGR	Marisol Williams	215 NW 15th Street	
		Delray Beach, FL 33444	₽ Remove
			☐ Change
MGR	Maria S. Williams	215 NW 15th Street	■ Add
		Delray Beach, FL 33444	☐ Remove
			☐ Change
			□ Add
			☐ Remove
			Change
~			☐ Add
			Change
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			☐ Change
			□ Add
			□ Remove
			□ Change

16/2017	08:30 PDT	TO:18506176383 FROM:5615448999	Page:	5
D. If amen	ding any other inform	nation, enter change(s) here: (Attach additional sheets, if necessary.)		
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(If an effect Note: If	the date inserted in this b	te date of filing:	suant to 605,0201 not be listed as	7 (3)(t the
If the record (b) The 9	rd specifies a delaye Oth day after the re	ed effective date, but not an effective time, at 12:01 a.m. on tecord is filed.	he earlier o	f:
Dated	3/15	2017		
		Signature of a member or authorized representative of a member		
	Maria S. Williams, Au	uthorized Member		
		Typed or printed name of signee		

Page 3 of 3

Filing Fee: \$25.00

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Division of Corporations

March 16, 2017

850 SW, LLC 215 NW 15TH STREET DELRAY BEACH, FL 33444US

SUBJECT: 850 SW, LLC REF: L17000032209

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

MISSING PAGE 2 OF AMENDMENT FORM

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Warren Regulatory Specialist II FAX Aud. #: H17000071522 Letter Number: 417A00005060

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