L170000 36115

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COVER LETTER

TO: Registration Se Division of Cor			
	ROSS 140 LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	ERIC P. STEIN, ESQ.		
		Name of Person	
	ERIC P. STEIN, P.A.		
		Firm/Company	
	1820 NE 163 STREET, SU	ЛТЕ 100	
		Address	
	NORTH MIAMI BEACH.	FL 33162	
	DocScrvice@epslaw.com	City/State and Zip Code	
	E-mail address; (to be used for future annual report notific	ration)
For further information c	oncerning this matter, please ca	all:	
Eric P. Stein, Esq.		786 248-1000	
	f Person	at () Area Code Daytime	Telephone Number
Mantana Hina ah ah ah Kard	C. H		
Enclosed is a check for the \$25,00 Filing Fee	□ \$30.00 Filing Fee &	□ \$55.00 Filing Fee &	□ \$60.00 Filing Fee.
2	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
	ING ADDRESS:	∦ street/courie	R ADDRESS:
Registration Section Division of Corporations P.O. Box 6327		Registration Section Division of Corporal Clifton Building	

Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BH BAL CROSS 140 LLC			
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our records.) I Liability Company)		
The Articles of Organization for this Limited Liability Compan Florida document number $\frac{L17000036115}{L17000036115}$.	y were filed on <u>02/14/2017</u>	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the limited lia</u>	bility company here:		
The new name must be distinguishable and contain the words "Limited Liab	bility Company," the designation "LLC" o	r the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	3323 NE 163 Street, PH #704		
(Principal office address MUST BE A STREET ADDRESS)	North Miami Beach, FL 33160	15. 19	
Enter new mailing address, if applicable:	3323 NE 163 Street, PH #704	8 -8	
(Mailing address MAY BE A POST OFFICE BOX)	North Miami Beach, FL 33160	- P	
		Univ 13	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he			
Name of New Registered Agent: Eric P. Stein.	P.A.		
New Registered Office Address: 1820 NE 163	Street, Suite 100		
	Enter Florida street address		
		2.17.2	
North Miami	Beach Flori	da <u>33162</u>	

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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. Thereby 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 added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	ZALMAN LEKACH	3323 NE 163 Street, PH #704	
		North Miani Beach, FL 33160	
			Remove
			☐ Change
			Add
			☐ Remove
			☐ Change
			□ Remove
			Change
			□ Add
			☐ Remove
			Change
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			☐ Change
			□ Remove
			□ Change

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(If an e <u>Note</u>	tive date, if other than the date of filing:
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Date	1 1/18 . 2019.
	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00