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	Division of Corporation	15	- <u>(47</u>
	Fax Number : (850)6		
From:			د
	Account Name : CORPOR	ATE CREATIONS INTERNATIO	NAL INC?
	Account Number: 110432		
	Phone : (561)6	94-8107	بب ٠
	Fax Number : (561)6		. 03

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 3307-BH, LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ń.

3307-BH, LLC			
(Name of the Lie	nited Ligbility Comp (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Florida document number L17000038939	Liability Company	y were filed on 02/17/2017	and assigned
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited liab	pility company here:	
The new name must be distinguishable and contain the	words "Limited Liabi	ility Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		175 SW 7th Street, Ste# 2309	2
(Principal office address MUST BE A STRE	ET ADDRESS)	Miami, FL 33130	<u> </u>
			- 명 : : : : : : : : : : : : : : : : : :
Enter new mailing address, if applicable:		175 SW 7th Street, Ste# 2309	
Mailing address MAX BE A POST OFFICE	E BQX)	Miami, FL 33130	· (<u>,</u>)
			· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:	Mor registered of Office address here SANTIAGO B	<u>e</u> ;	r the name of the new
		·	
New Registered Office Address:	175 SW 7th Str	cct, Ste# 2309 Enter Plarida street address	
	Miami	. Florida ³	3)30
		City	Zip 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.

Carlos M Alvarez, Attorney-in-Fact

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	<u>Name</u> SPORTIELLO, MICHELE	Address	Type of Action
MGRM	or or reality, when the		□ Add
			■ Remove
MGRM	CRUZ DE SPORTIELLO,		Change
	FANNY		
			■ Remove
MCP	SANTIAGO BRAVO	175 SW 7sh Course St. # 2272	O Change
MGR	·	175 SW 7th Street, Sie# 2309	■ Add?
		Miami, FL 33130	☐ Remove
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	tive date, if other than the date of filing: [Coptional] [Rective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ment's effective date on the Department of State's records.	605.0207 (listed as t
If the re (b) Th	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear 90th day after the record is filed.	irlier of:
Dates	September 13 2019	
	Carried	