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Special Instructions to	Filing Officer:	
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P. SCOTT FEB 2 8 2017

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

2/27/17

NAME:

314 NW 2 AVENUE LLC

TYPE OF FILING: AMENDMENT

COST:

25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

314 NW 2 AVENUE, LLC

(<u>Name of the Limited Liabili</u> (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability Corida document number L17000041406	Company were filed on February 21, 2017	and assigned
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the lim	ited liability company here:	
314 NW 2 STREET, LLC		
he new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "LLC" or the al	obreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDI	RESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
If amending the registered agent and/or registered agent and/or the new registered office add		the name of the
agent unta of the new registered office unta		音音 フ
Name of New Registered Agent:		整部 召 コ
New Registered Office Address:		留言 m
	Enter Florida street address	三湯をリ
	, Florida	ララ の
	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.

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:

æ,

MGR = Manager AMBR = Authorized Member <u>Title</u> <u>Name</u> <u>Address</u> **Type of Action** _ 🗆 Add □ Remove _□ Change _□ Add ☐ Remove □ Change □ Add □ Remove ☐ Change _□ Add _□ Remove Remove Control of Change _□ Add □ Remove

Change

Effective date, if other than the date of filing: (If an effective date, if other than the date of filing: (If an effective 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 MISAD Mote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records. the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier.) The 90th day after the record is filed. Dated February 24 2017 Signature of a member or authorized appresentative of a member Saluators S Green MGRM	· · · · · · · · · · · · · · · · · · ·		
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