## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability (	Company were filed on Februar	ry 22, 2017	and assigned
Florida document number L17000042560	—·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ited liability company here:		
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the design	ation "LLC" or the abbi	eviation "L.L.C."
Enter new principal offices address, if applicable:		1.24 2.43	
(Principal office address MUST BE A STREET ADD)	RESS)	in	13
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Enter new mailing address, if applicable:	,	N C C C C C C C C C C C C C C C C C C C	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  R. If amending the registered agent and/or regis		ORIDA.	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or regis	stered office address on our	ORIDA.	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered agent and/or the new registered office add	stered office address on our	r records, enter t	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered agent and/or the new registered office add  Name of New Registered Agent:	stered office address on our lress here:	r records, enter t	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered agent and/or the new registered office address tered agent.  Name of New Registered Agent:	stered office address on our lress here:	r records, enter t	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered agent and/or the new registered office address tered agent.  Name of New Registered Agent:	stered office address on our lress here: Enter Florida st	r records, enter t	he name of the ne

305-285-5555

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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	Harrison Mischel	3001 SW 3rd Avenue	Add
		Miami, FL 33129	□ Remove
		**	☐ Change
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record specifies a delayed effect	ive date, but not an effectiv	e time, at 12:01 a.	m, on the earlier of:
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cd February 28	2017	J	
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Jonathan Magolnick	U		

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