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(Requestor's Name)
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COVER LETTER

Registration Section

Division of Corporations

TO:

	Residential, LLC		
SUBJECT:	Name of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Victor E. Delgado		
	Harbour Residential, LLC	Name of Person	
	1110 Brickell Avenue Suite	Firm/Company 9 405	
	Miami, FL 33131	Address	
	victor@harbourresidential.c	City/State and Zip Code om	
	E-mail address; (to be used for future annual report no	tification)
For further information of	concerning this matter, please c	all:	••
Victor E. Delgado		786 554-0397	
Name o	of Person	at () Area Code Daytir	ne Telephone Number
Enclosed is a check for t	he following amount:		
S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Registi Divisio P.O. B	ING ADDRESS: ration Section on of Curporations ox 6327 assec, FL 32314	STREET/COUR Registration Secti Division of Corpe Clifton Building 2661 Executive C	orations

Tallahassee, FL 32301

₹.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION --OF



2019 AT 2:30 PH 4:45

Harbour Residential,	LLC,	

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

(81)	lorida Limited	rnaomy Company)	
The Articles of Organization for this Limited Liabili Florida document number L17000049792	ity Company	were filed on	and assigned
This amendment is submitted to amend the followin	ıg:		
A. If amending name, enter the new name of the	limited liab	nility company here:	
The new name must be distinguishable and contain the words	"Limited Liabi	lity Company," the designation	on "LLC" or the abbreviation "L.L,C."
Enter new principal offices address, if applicable	:		
(Principal office address MUST BE A STREET ADDRESS)		1110 Brickell Avenue	- Suite 405
		Miami, FL 33131	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1110 Brickell Avenue	- Suite 405
		Miami, FL 33131	
B. If amending the registered agent and/or registered agent and/or the new registered office			records, <u>enter the name of the</u>
Name of New Registered Agent:			
11	110 Brickell	Avenue- Suite 405	
	110 Brickell	Avenue- Suite 405 Enter Florida stree	u address
New Registered Office Address: 17	110 Brickell /		n address Florida <mark>33131</mark>

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 adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Victor E. Delgado	1110 Brickell Avenue- Suite 405	
		Miami, FL 33131	
			Remove
	Andres Navarro	1110 Brickell Avenue- Suite 405	■ Change
MGR	,		
		Miami, FL 33131	B Add
			□ Remove
			☐ Change
-			
			Remove
•			
			□ Change
			 Add
			□ Remove
			☐ Change
			□ Remove
			Change
			□ A.1.1
			☐ Remove
			□ Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
•	
,	
•	
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-	
(If an ef Note:	ive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	\mathrea m
	Signature of a member or authorized representative of a member
	Victor E. Delgado

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Filing Fee: \$25.00