(Requestor's Name)			
(Address)			
(1.1881.035)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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Account#: 120000000088

Date:	07/19/2019	
Name:	<b></b>	_
Reference	#:1109332	_
Entity Nam	e: <b>2495 NW</b>	41 STREET LLC
Artic	cles of Incorporation/Authorization	to Transact Business
<b>☑</b> Ame	endment	
☐ Cha	nge of Agent	
☐ Reir	nstatement	
☐ Con	version	
☐ Mer	ger	
Diss	solution/Withdrawal	
☐ Ficti	tious Name	
Othe	er	
Authorized	Amount: \$25.00	<del></del>

## **COVER LETTER**

TO:	Registration Sec Division of Corp			
CI:DIE	2495 NW 41			
SUBJE	CT:	Name of Lim	ited Liability Company	
		mendment and fee(s) are sub-	•	
		William D.Redfern		
		<del></del>	Name of Person	
		Fletcher Capital Managem	ent LLC	
			Firm/Company	
		7750 Okeechobee Blvd, ur	nit 4571	
			Address	
		West Palm Beach, FL 334	11	
			City/State and Zip Code	<del></del>
		admin@oakescap.com		
		E-mail address: (	to be used for future annual report notifi	cation)
For furtl	er information co	ncerning this matter, please ca	ıll:	
Willia	am D. Redfern		917 7059197 at ( )	
	Name of	Person	at () Area Code Daytime	Telephone Number
Enclosed	I is a check for the	following amount:		
<b>S</b> \$25.	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)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2495 NW 41 Street LLC		
( <u>Name of the Limited Liability Com</u> (A Florida Limited	pany as it now appears on our records.) I Liability Company)	
The Articles of Organization for this Limited Liability Companies Florida document number $\frac{1.17000061542}{1.17000061542}$ .	y were filed on March 16, 2017	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Lial	bility Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		7. <b>20</b>
Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		9 AM
Mailing address MAY BE A POST OFFICE BOX)		37 =
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he  Name of New Registered Agent:		er the name of the
New Registered Office Address:		
	Enter Florida street address	
	, Florida _	Zin Code
	City	Zm 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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Andrey Strigin	7750 Okeechobee Blvd, Unit 4571 West Palm Beach, FL 33411	Add
			Ø Remove
			Change
			☐ Remove
			Change JUL 19
			O Add O AM O Römöve O Chininge
			Cliarge C
			□ Remove
		<del></del>	Change
<del></del>		<del></del>	□ Add
			□ Remove
			Change
			Add
		<u>_</u>	Remove
			Channe

D. If amend	ding any other informati	on, enter change(s) here: (Attach additional si	heets, if necessary.)
	,		
			<u>.                                    </u>
		<del></del>	<del></del>
			<b>20</b>
			2019 JUL
			<u> </u>
			AH II: 40
_			· ·
(If an effect Note: If	e date, if other than the cive date is listed, the date must the date inserted in this blo t's effective date on the Department	be specific and cannot be prior to date of filing or more than it does not meet the applicable statutory filing requi	(optional) in 90 days after filing.) Pursuant to 605.0207 (3)(b) direments, this date will not be listed as the
	rd specifies a delayed Oth day after the reco	effective date, but not an effective time, rd is filed.	at 12:01 a.m. on the earlier of:
Dated	July 18	. 2019	
	( )	renature of a member or authorized representative of a m	nember
	William	D. Redfern  Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00