Division of Corporations

L1700074036

Florida Department of State

5/10/17, 9:19 PM

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : CUSTOM MANAGEMENT LLC

Account Number : I20170000014 Phone : (302)307-3686

Fax Number : (561)228-0747

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:	

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 120 SOUTH D STREET LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



120 SOUTH D STREET LLC

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

for this Limited Liability Company were filed on 04/05/2017

The Articles of Organization for this Limited Liability	Company we	re filed on	and assigned
Florida document number L17000074036	·		
This amendment is submitted to amend the following:	:		
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  n/a  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."  Enter new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:  Name of New Registered Agent:    Ilia Capital, LLC			
		\	
The new name must be distinguishable and contain the words "L	imited Liability (	Company," the designation "LLC" or	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2	211 Grand Pointe Drive	
• •	DRESS)	alm Beach Gardens, FL 33418	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)			
registered agent and/or the new registered office ad  Name of New Registered Agent:	<u>ldress here</u> :		enter the name of the new
Data	m Beach Garder		_ 33418
· Fair	II Deach Garder	, Florid	da
		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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	CUSTOM MANAGEMENT, LLC	4371 NORTHLAKE BLVD	Add
		Suite 305	■ Remove
		Palm Beach Gardens, FL 33410	☐ Change
AMBR	Ilia Capital, LLC	211 Grand Pointe Drive	
		Palm Beach Gardens, FL 33418	□ Remove
			☐ Change
			□ Add
		<del>,</del>	□ Remove
	-	<u></u>	Change
			Add
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		Signature of	a member or aut	horized represer	MGK ntative of a member			-
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