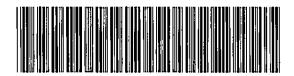
(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Name)	<u> </u>
(Do	ocument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	

Office Use Only



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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Vista Linda LLC	
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our records.) nited Liability Company)
The Articles of Organization for this Limited Liability Composition document number 1.17000076742	pany were filed on 4/5/17 and assigned
This amendment is submitted to amend the following:	
a. If amending name, enter the new name of the limited	liability company here:
he new name must be distinguishable and contain the words "Limited I	Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS	<u>s)</u>
	7. DC
nter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	<u>,</u>
	7.0
If amending the registered agent and/or registered egistered agent and/or the new registered office address	ed office address on our records, enter the name of the shere:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	Florida
·	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

COVER LETTER

Div.	ision of Corp	orations		
SUBJECT:	Vista Linda	LLC		
		Name of Lim	ited Liability Company	
The enclosed	l Articles of a	Amendment and fee(s) are sub	mitted for filing	
		·	· ·	
Please return	all correspor	idence concerning this matter	to the following:	
		Linda Dorfman		
			Name of Person	
		Vista Linda LLC		
Firm/Company				
	1 South Ocean Blvd. Suite 200			
			Address	
		Boca Raton, FL 33432		
			City/State and Zip Code	
		ldorfman@gsoboca.com	_	
		E-mail address: ()	to be used for future annual report notifi	cation)
For further in	iformation co	ncerning this matter, please ca	aH:	
Linda Dorfm	าลท		561 447-9780 at ()	
	Name of	Person	at () Area Code Daytime	Telephone Number
Enclosed is a	check for the	e following amount:		
■ \$25.00 Fi	iling 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:

TO:

Registration Section

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

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	Elise Gross	9641 Sunrise Lakes Blvd Unit 209	
		Sunrise, FL 33322	■ Remove
		9641 Sunrise Lakes Blvd Unit 209	Change
MGR	Linda Dorfman	Sunrise, FL 33322	Add
			☐ Remove
			☐ Change
			- □ Remove
			∵ □ Change
			ngen Til
			Add Remove
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ective date, if other than the effective date is listed, the date mus	date of filing:		(optional)	
reffective date is listed, the date mus t <u>er</u> . If the date inserted in this blo	be specific and cannot be sek does not meet the a	prior to date of filin policable statutor	ig or more than 90 days v filme requirements	after filing.) Pursu this date will no	ant to 605,02 of be listed
ument's effective date on the De			, mig requirement	. 1113 4410 1111 111	th be noted.
record specifies a delayed	effective date, bu	t not an effect	tive time, at 12:	01 a.m. on th	ne earlier
he 90th day after the reco	ord is filed.				
	2014				
October 10 ed	2017	<u> </u>			
	- V)			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00