# L1700091189

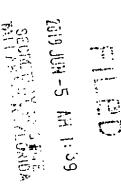
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## COVER LETTER

TO:	Registration Sec Division of Corp			
elib ic		VENUE EAST, LLC		
SUBJE	СТ:	Name of Lim	ited Liability Company	
The enc	losed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Picase n	eturn all correspon	dence concerning this matter	to the following:	
		SAMUEL J. CANTOR		
			Name of Person	
		SAMUEL J. CANTOR, P.	Α.	
			Firm/Company	
		1001 YAMATO ROAD, S	SUITE 310	
			Address	<del></del>
		BOCA RATON, FL 33431	ı	
			City/State and Zip Code	
		PATTY@SAMCANPA.CO		
		E-mail address: (	to be used for future annual report notif	fication)
For furth	her information co	ncerning this matter, please ca	ail:	
PATRI	CIA KOHSMAN		561 982-9555 at ()	
	Name of	Person	Area Code Daytimi	e Telephone Number
Enclosed	d is a check for the	following amount:		
\$25.	.00 Filing Fee	☐ \$30.00 Filing Fcc & 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

100 BASE AVENUE EAST, LLC		
(Name of the Limited (A	Liability Company as it now appears on our recor Florida Limited Liability Company)	rds.)
The Articles of Organization for this Limited Liab Florida document number L17000091189		and assigned
This amendment is submitted to amend the follow		
A. If amending name, enter the new name of the	ne limited liability company here:	
The new name must be distinguishable and contain the word	ls "Limited Liability Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BO)		7619 JUL - 5 II
B. If amending the registered agent and/or registered agent and/or the new registered offic		ds, enter the name of the new
Name of New Registered Agent:		변호
New Registered Office Address:		
	Enter Florida street addre	255
		lorida
	City -	Zıp 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
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record	specifies a dela	yed effective	date, but no	ot an effective	e time, at 12:01	a.m. on the ea	rlier of
ne 90	th day after the	record is filed					
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		) Signature of a	incurrer of auto	orizen representat	ive of a member		

Page 3 of 3

Filing Fee: \$25.00