

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000136221 3)))



H170001362213ABCX

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: SCOTT, HARRIS, BRYAN, BARRA & JORGENSEN, PA

Account Number : 070674001534 Phone : : .(561)624-3900

Fax Number :

: (561)624-3533

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

Email Address:

rkbarra@scott-harris.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

ALEXENA LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

17 III 8 II 9 I 6

BITHAY 18 AH II: 46

O SIMMONS

COVER LETTER

TO: Registration Sec Division of Corp	tion orations		
	LLC.		
	Name of Lim	ited Liability Company	
Name of Person Area Code Daytime Telephone Number 3 nelosed is a check for the following amount:			
Please return all correspon	dence concerning this matter	to the following:	
	Richard K. Barra, Esq.	•	
		Name of Person	
	Scott, Harris, Bryan, Barra	& Jorgensen, P.A.	
		Firm/Company	 _
	4400 PGA Boulevard, Suit	e 603	
		Address	
	Palm Beach Gardens, Flori	da 33410	
		City/State and Zip Code	
	-		
			arion)
For further information co	= • •		
Richard K. Barra			
Name of	Person	Area Code Daytime T	Glephone Number
Enclosed is a check for the	e following amount:		
\$25.00 Filing Fee	□ \$30.00 Filing Pee & 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

ALEXENA LLC		
(Name of the Limited Liability (A Florida	y Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co Florida document number L17000105657	ompany were filed on May 11, 2017	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limi	ted Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
•	, , , , , , , , , , , , , , , , , , , ,	and and
Enter new principal offices address, if applicable:		and the same
(Principal office address MUST BE A STREET ADDR.	ESS)	
	. 1	· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
B. If amending the registered agent and/or regist registered agent and/or the new registered office address Name of New Registered Agent:		T the hance of the ne
New Registered Office Address		
•	Enter Florida street address	
	Florida, Florida	Zip Code
	City	Zip Code
New Registered Agent's Signature, if changing Registered		
I hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and co accept the obligations of my position as registered ag being filed to merely reflect a change in the registered company has been notified in writing of this change.	omplete performance of my duties, and I an tent as provided for in Chapter 605, F.S. O	n familiar with and r, if this document is
	a.l	
	If Changing Registered Agent, Signature of New	Registered Agent

Page 1 of 3

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>	Name	Address	Type of Action
MGR	Bailey, Larry	1030 15th Street UB 1 Suite 373	
		Washington, D.C. 20005	Remove
, ·			Change
AMBR	Williams, Serena	4400 PGA Boulevard, Suite 603	⊟ Add
_		Palm Beach Gardens, Plorida 33410	
		<u></u>	Change
AMBR	Ohanian, Alexis K.	4400 PGA Boulevard, Suite 603	= Add
		Palm Beach Gardens, Plorida 33410	Remove
			Change
			□ Add—
			□ Remove
		4 1	☐ Change
			Add \(\)
			🗆 Remove
			☐ Change
			□ Remove
			Chango

	•	
		—
•	· · · · · · · · · · · · · · · · · · ·	
·	<u> </u>	
	• • • •	
		
e .		
ective date. If other the	nan the date of filing; (optional) date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuan	
offective date is listed, the c	date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuan n this block does not meet the applicable statutory filing requirements, this date will not	t to 605 he list
cument's effective date or	in the Department of State's records.	DO 1120
	,	
record specifies a de he 90th day after th	lelayed effective date, but not an effective time, at 12:01 a.m. on the	earli
the seath day alsee to		
	2017	
May 15	2017	
ied May 15	1/1/	
ied May 15	3 A. A.I	
ted May 15	Signature of a shember or authorized representative of a member	
LARRY D. BAI	Signature of a thember or authorized representative of a member	Lundon
ied	Signature of a member or authorized representative of a member	