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COVER LETTER

	Registration So Division of Co				
e110 157		Y CENTER, LLC			
SUBJEC.	T:		nited Liability Company		
The enclo	scd Articles of	Amendment and fee(s) are sub-	omitted for filing.		
Please ret	urn all correspo	andence concerning this matter	to the following:		
		JEFFREY HALL			
			Name of Person		
		GREEN & PIOTRKOWS	KI, PLLC		
			Firm/Company		
		317 - 71ST STREET			
			Address		
	MIAMI BEACH, FL 33141				
			City/State and Zip Code		
		Roy@titannadlan com	to be used for future annual report notification)		
For furthe	r information c	oncerning this matter, please o			
	· · · · · · · · · · · · · · · · · · ·	Ĉ.D.	at () Area Code Daytime Telephone		
	Name of Person Area Code Daytime Telephone Number				
Enclosed	is a check for th	ne following amount:			
■ \$25.0	0 Filing Fee	S30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) C	60.00 Filing Fee, Sertificate of Status & Sortified Copy additional copy is enclosed)	
F L P	Aailing Address Registration S Division of C 2.O. Box 632 allahassee, F	Section orporations 7	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, S Tallahassee, FL 32303	e	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

(Nume of the Limited Liability Company as it now appears on (A Florida Linded Liability Company)	our records.)
The Articles of Organization for this Limited Liability Company were filed on MAY Florida document number 117000109316	17, 2017 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	· · · · · · · · · · · · · · · · · · ·
The new name must be distinguishable and contain the words "Limited Liability Company," the design	nation "LLC" or the abbreviation "L
Enter new principal offices address, if applicable:	5 3 C
(Principal office address MUST BE A STREET ADDRESS)	~
	· 2 李 :
	. 0
Enter new mailing address, if applicable:	3 -
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our recoragent and/or the new registered office address here:	rds, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	
Enter Floraia s	street address
	, Florida
	Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent:	

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.

It 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>	Name	Address	Type of Action
MGR	Simha Rabi	845 NE 79th Street	□Add
		Miami, FL 33138	■Remove
			□Change
			DAM
			□Remove
			□Change
			□Add
			☐ □ Remove
			□Change
			DAdd
			□Remove
			☐ Change
			⊡∧dd
			DRemove
			□Change
			⊟Add
			□Remove
			□Change

If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days. Note: If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records. e record specifies a delayed effective date, but not an effective time, at I2:01 a.m. on the earlier of the filed.	
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record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of d is filed.	after filing.) Pursuant to 605.07
d is filed.	and date will not be like o
d is filed.	
1 1 20 2 2 2 2	(b) The 90th day after the
N	
Dated November 20, 2020.	
Routhburs all &	
Signature of modelber or authorized representative of a member	

Filing Fee: \$25.00