

U7000121074

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

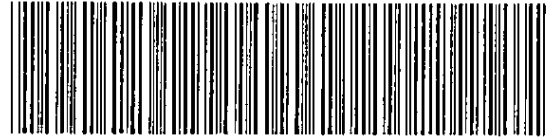
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2020 JUL 27 PM 3:22

FILED

2020 JUL 27 PM 3:59

JUL 28 2020

S. YOUNG

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 361893 4311473

AUTHORIZATION :

COST LIMIT : \$ 55.00

ORDER DATE : July 21, 2020

ORDER TIME : 3:0 PM

ORDER NO. : 361893-005

CUSTOMER NO: 4311473

DOMESTIC AMENDMENT FILING

NAME: ALLAPATTAH VENTURES LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT# 62980

EXAMINER'S INITIALS: _____

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

ALLAPATTAH VENTURES LLC

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

The Articles of Organization for this Limited Liability Company were filed on June 2, 2017 and assigned

Florida document number L17000121074

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 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:

Interurban, LLC

New Registered Office Address:

150 S.E. 2nd Avenue, Suite 800

Enter Florida street address

Miami

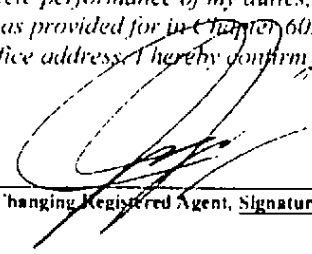
Florida 33131

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Allapattah Manager, LLC	150 S.E. 2nd Avenue, Suite 800	<input type="checkbox"/> Add
		Miami, FL 33131	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Victor Ballester	150 S.E. 2nd Avenue, Suite 800	<input checked="" type="checkbox"/> Add
		Miami, FL 33131	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Nelson Stabile	150 S.E. 2nd Avenue, Suite 800	<input checked="" type="checkbox"/> Add
		Miami, FL 33131	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Jacob Morrow	150 S.E. 2nd Avenue, Suite 800	<input checked="" type="checkbox"/> Add
		Miami, FL 33131	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Paulo Melo	150 S.E. 2nd Avenue, Suite 800	<input checked="" type="checkbox"/> Add
		Miami, FL 33131	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

E. Effective date, if other than the date of filing: _____ (optional)

Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated July

24th 2020

Signature of a member or authorized representative of a member

DAULO MELO

Typed or printed name of signee

Filing Fee: \$25.00