11/2/2020

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Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MASAVEU & CO MANAGEMENT REAL ESTATE US LLC

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Corporate Filing Menu

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF (AZJ)... = 1. Fill(2: 13)

	Ciry	ZipCode
	Plantation	, Florida 33324
New Registered Office Address:	1200 South Pine Island Road EmerFl	oridastreetaddress
Name of New Registered Agent.	1700 (C. of D)	
Name of New Registered Agent:	NRAI Services, Inc.	
B. If amending the registered agent and/or agent and/or the new registered office address.		records, <u>enter the name of the new registere</u>
	<u> </u>	
(Mailing address MAY BE A POST OFFICE	<u></u>	
Enter new mailing address, if applicable:		
(Principal office address MUST BE A STREI	<u>ET ADDRESS)</u>	
Enter new principal offices address, if appli	cable:	
"L,L.C."		
The new name must be distinguishable and contain the	words "Limited Liability Company," the	designation "LLC" or the abbreviation
A. If amending name, <u>enter the new name c</u>	of the limited liability company h	ere:
This amendment is submitted to amend the following	lowing:	
Florida document number 1.17000136508	,·	
The Articles of Organization for this Limited L		une 22, 2017 and assigned
	ted Liability Company as it now apper (A Florida Limited Liability Company)	
MASAVEIL	& CO MANAGEMENT REAL EST	ATE US LLC

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.

NRAI Services, Inc. by:

Kathyrn A. Widdoes

Changing Registered Agent. Signature of New Registered Agent

Assistant Secretary

MGR = Manager

To: Page 4 of 5

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 = N AMBR = A	Manager Authorized Member	i.iJk	-9 PIH2: 13
<u>Title</u>	<u>Name</u>	Address	Type of Action
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Note: If the date inserted in this b	e date of filing: Istate specific and cannot be prior to date of lock does not meet the applicable statu Department of State's records.	(optional) Bling or more than 90 days after filing) Pursuant to 605,0 attory filing requirements, this date will not be listed	1207 () I as tl
he record specifies a delayed effecti ord is filed	ve date, but not an effective time, at 12	2.61 a.m. on the earlier of (b). The 90th day after t	the
Dated October 27	2020		
	- A		
	Signature of a member or authorized repr	presentative of a member	
	Victor Roza		
	Typed or printed name o	of signee	