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COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	Rose Pole Name of Lim	y Weinstein	LLC
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	20 H
Please return all corresp	ondence concerning this matter	to the following:	
	Rosc	Poley Weinsteinsteinsteinsteinsteinsteinsteinst	20 FAY 11 PA 12: 33
	Rose	Poley Weinstein Fidn/Company	
	37 24	Cherry Blossom Address	Street
	·	Beach, FL 3345 City/State and Zip Code Cach Fine Hones. ne to be used for future annual report not	
For further information	concerning this matter, please c		l
Rose Po	of Person	at (<u>5/o1)</u> 3 7 3 - Area Code Daytin	5977 e Telephone Number
Enclosed is a check for	the following amount:		
\$\$ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration Division of O P.O. Box 63	Section Corporations	Street Address: Registration Se Division of Co The Centre of T	porations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF The Articles of Organization for this Limited Liability Company were filed on _ Florida document number <u>i</u> 17000 183 629 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: New Registered Office Address:

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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amending any other infor	mation, enter change(s) here: (A	ttach additional sheets, if no	ecessary.)
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	Signature of a member of authorized	Trepresentative of a member	
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	Rose Poley W	·	,