## 117000206022

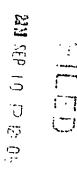
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## **COVER LETTER**

Division of C	Corporations		
Terper I	LLC		
SOBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	Alfredo Terrero		
		Name of Person	
	Terper LLC		
		Firm/Company	
	800 NE 72nd street		
		Address	
	Miami, FL 33138		
		City/State and Zip Code	
	alfredoterrero@gmail.com	(to be used for future annual report notif	ication)
For Contain a information			
	n concerning this matter, please c		TO (
Alfredo Terrero		215 485-7892 ar ()	
Nam	e of Person	Area Code Daytime	Telephone Number
Enclosed is a check fo	r the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & 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)
35.	ILING ADDDESS.	etheet/c/Althi	CD ANNDESS.

MAILING ADDRESS:

TO:

Registration Section

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**

		Terper LLC		
y as it now appears on our records.) ability Company)	ted Liability Company : (A Florida Limited Liab	(Name of the Lim		
vere filed on 10/05/2017 and	iability Company we			
	owing:	ndment is submitted to amend the fol	his ame	
ity company here:	f the limited liabilit	ending name, <u>enter the new name (</u>	. If an	
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y Company, the designation LEC of the authertation	·	-		
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~ <del></del>	-	(Mailing address MAY BE A POST OFFICE BOX)		
-	<u>BOX)</u> _			
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ce address on our records, enter the nan	•			
	ffice address here:	1 agent and/or the new registered o	gistere	
		Name of New Registered Agent:		
reet	800 NE 72nd Stre	New Registered Office Address:		
Enter Florida street address				
Florida 33138	Miami			
City Zip Coo				
, Florida 33/38 Zap (		stered Agent's Signature, if changing	Sew Rea	
P 10 D E 01 nam	re filed on 10/05/2017  v company here:  Company." the designation "LLC" or the abbrev  e address on our records, enter the  Enter Florida street address  Florida 33138	Liability Company were filed on 10/05/2017  lowing:  of the limited liability company here:  words "Limited Liability Company." the designation "LLC" or the abbreve cable:  ET ADDRESS)  // Or registered office address on our records, enter the office address here:  800 NE 72nd Street  Enter Florida street address  Miami Florida 33138	(Name of the Limited Liability Company as it now appears on our records.)  (A Florida Limited Liability Company)  cles of Organization for this Limited Liability Company were filed on document number L17000206022  endment is submitted to amend the following:  mending name, enter the new name of the limited liability company here:  ame must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreview principal offices address, if applicable:  al office address MUST BE A STREET ADDRESS)  ew mailing address, if applicable:  and agent and/or the new registered agent and/or registered office address on our records, enter the red agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  800 NE 72nd Street  Enter Florida street address  Miami , Florida 33138	

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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effective date is listed, the date must be specific and cannot be prior to date of filing of	or more than 90 days after filing.) Pursuant to 60:	
te: If the date inserted in this block does not meet the applicable statutory frament's effective date on the Department of State's records.	iting requirements, this date will not be list	ea as
<b>,</b>		
record specifies a delayed effective date, but not an effective	vo time at 12.01 a.m. as the appli	
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Signature of a member of authorized representa		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00