## Florida Department of State

Division of Corporations
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To:

Division of Corporations

ax Number : (850) 617-6383

From:

Account Name : TORRES & VADILLO, LLP

Account Number: 120150000038
Phone: (305)485-9700
Fax Number: (305)436-0191

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

EMALL ADDRESS: COMPORATIONS WESTERNUS COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
MILPORT ENTERPRISES LLC

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Corporate Filing Menu

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THAMASSEE FLORIDA

S. WARREN

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company has been notified in writing of this change.

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MILPORT ENTERPRISES LLC (Name of the Limited Liability (A Florida	y Company as it new appears Limited Liability Company)	on our records.)			
The Articles of Organization for this Limited Liability Co. Florida document number	? 	119/17	and assigned		
This amendment is submitted to amend the following:	8				
A. If amending name, enter the new name of the limit	ed ligbility company her	<u>:e</u> :	78 <b>7</b>		
N/A			<u> </u>		
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the de-	signation "LLC" or th	e abbreviation 11.C.2		
Enter new principal offices address, if applicable:	439 NE 23RD \$7	REET	(V) 0 F		
(Principal office address MUST BE A STREET ADDR	ESS) MIAMI, FLORII	DA 33137			
			70		
Enter new mailing address, if applicable:	2455 SW 27TH A	AVENUE	ORIDA ORIDA		
(Mailing address MAY BE A POST OFFICE BOX)	SUITE 220				
	MIAMI, FLORII	DA 33145			
B. If amending the registered agent and/or registered agent and/or the new registered office addresses	ered office address on ess here:	our r <b>ec</b> ords, <u>en</u> t	er the name of the new		
Name of New Registered Agent: MANU	MANUEL J VADILLO, ESQ.				
New Registered Office Address: 11402 P	Idress: 11402 NW 41 STREET, SUITE 202				
	Enter Florida street address				
DORA	L	, Florida	33178		
	City		Zip Code		
New Registered Agent's Signature, if changing Registered	Agent:				

Changing Registered Agent Sensitive of New Registered Agent

Page 1 of 3

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

## H17000276123 3

ξ.

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

Title	Name	Address	Type of Action
MGR	ARTHUR POROSOFF	2455 SW 27TH AVENUE	■ Add
		SUITE 220	□ Remove
		MIAMI, FLORIDA 33145	Change
MGR	23 PALMS, LLC	2937 S.W. 27T AVENUE	
•		SUITE 303	Add
		COCONUT GROVE, FL 33133	■ Remove
			☐ Change
MGR	MILPORT ENTERPRISES GP, LL	4736 NORTH BAY RD	🖸 Add
		MIAMI BEACH, FL 33140	■ Remove
			☐ Change
			Add
			☐ Remove
			Change
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