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COVER LETTER

	Registration Sec Division of Corp			. •
SUBJEC		UM SOUTH 1603 LLC		
SUBJEC	.1:	Name of Limite	d Liability Company	——————————————————————————————————————
The enclo	osed Articles of	Amendment and fee(s) are submi	itted for filing.	
Please ret	turn all correspon	ndence concerning this matter to	the following:	
		Pamela Poveda		
			Name of Person	
		CONTINUUM SOUTH 160	3 LLC	
			Firm/Company	
		600 Brickell Ave., Suite 157	0	
			Address	
		Miami, Florida, 33131		
			City/State and Zip Code	
		pam@optimumcp.com		
		E-mail address: (to	be used for future annual report not	ification)
For further	er information co	oncerning this matter, please call	:	
Josefina	Eizayaga		305 5370800 at ()	
	Name of	Person	Area Code Daytin	ne Telephone Number
Enclosed	is a check for th	e following amount:		
□ \$ 25.0	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)

MAILING ADDRESS:

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**

CONTINUUM SOUTH 1603 LLC

ARTICLES	S OF ORGANIZATION	
	OF	4
		1
CONTINUUM SOUTH 1603 LLC		
(Name of the Limited Liabil	ity Company as it now appears on our records.) a Limited Liability Company)	
(A Florid	a Ellinted Elability Company)	多
he Articles of Organization for this Limited Liability C	Company were filed on	and assigned
lorida document number L17000219167	. ,	, '%',
ionda document namber	·	
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the lim	ited liability company here:	
he new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
• • •		
<u>Principal office address MUST BE A STREET ADDI</u>	RESS)	
		<u> </u>
inter new mailing address, if applicable:		
•		
Mailing address MAY BE A POST OFFICE BOX)		_
. If amending the registered agent and/or regis		nter the name of the new
egistered agent and/or the new registered office add	<u>lress here</u> :	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	. Florid	a
	City	Zip Code
lew Registered Agent's Signature if changing Registere	ad Agants	

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
MGR	Scatturice Family LLC	600 Brickell Ave., Suite 1570, Miami, FL, 33131	Add
			■ Remove
			Change
MGR	Gaston Marquevich	600 Brickell Ave., Suite 1570, Miami, FL, 33131	■ Add
			☐ Remove
			Change
	-	·	
			Remove
			Change
		<u> </u>	Add
			Remove
			Change
			Add
			Remove
		-	Change
			Add
			Remove
			Change

If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(If an e	effective date, if other than the date of filing:
the ro	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Date	d 11/20 , 2019 .
	r A
	Signature of a member or authorized representative of a member
	Gaston Marquevich - Manager

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WRITTEN CONSENT IN LIEU OF MEETING OF THE MEMBERS OF CONTINUUM SOUTH 1603 LLC

The undersigned, Scatturice Family LLC, being the sole Member of CONTINUUM SOUTH 1603 LLC, a limited liability company organized and existing under the laws of the State of Florida (the "Company"), and Leonardo Scatturice, as Manager of the Company do hereby take the following actions and adopt the following resolutions by unanimous written consent in lieu of a meeting of the Members and Managers of the Company, pursuant to Section 605.04073 of the Florida Revised Limited Liability Company Act:

RESOLVED, that is in the best interest of the Company to file Articles of Amendment to the Company's Articles of Organization in order to appoint Gaston Marquevich as the Company's Manager together with Leonardo Scatturice who will remain as appointed Manager.

FURTHER RESOLVED, that the Managers of the Company are hereby authorized, empowered and directed to do and perform any and all acts and deeds deemed by it necessary to carry out the foregoing resolutions.

IN WITNESS WHEREOF, the undersigned Member has executed this Written Consent this 1st day of November, 2019.

Member: SCATTURICE FAMILY, LLC,

a Belize limited liability.company

Leonardo Scatturice, its Manager

Manager: LEONARDO SCATTURICE,

Leonardo Scatturice

Gaston Marquevich herein accepts his appointment as Manager of the Company as of the date

hereof.

Gaston Marquevich

Manager