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## **COVER LETTER**

TO:		istration Sec ision of Corp				
SUBJE	<b>С</b> ЧГ.	A and E Inv	restments of South Florida LLC	С		
SUBJE	CI.	<del></del>	Name of Lim	ited Liability Company		_
			Amendment and fee(s) are sub-	_		
		·	Adriano Swift	Ū		
				Name of Person		
			A and E Investments of So	outh Florida LLC		
			· · · · · · · · · · · · · · · · · · ·	Firm/Company		
			1440 SW 30th St			
				Address		
			Fort Lauderdale, FL 33315	;		
			adrianoswift9@gmail.com	City/State and Zip Code		
			<del>-</del> -	to be used for future annual r	eport notification)	<u> </u>
For furt	her in	formation co	oncerning this matter, please ca	all:		
Adriano	Swit	ft		561 856	-3525	
		Name of	Person	Area Code	Daytime Telephone Nu	mber
Enclose	d is a	check for the	e following amount:			
\$25.	.00 Fi	ling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Cert	00 Filing Fee, ificate of Status & ified Copy tional 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

A and E Investments of South Florida I		
(Name of the Limited I	iability Company as it now appears on our records.) lorida Limited Liability Company)	<u>.</u>
_	lity Company were filed on 11/3/2017	and assigned
rida document number L17000228119		
amendment is submitted to amend the following	ng:	
If amending name, enter the new name of the	e limited liability company here:	
new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
er new principal offices address, if applicable	e:	
incipal office address MUST BE A STREET A		
		****
ter new mailing address, if applicable:		
illing address MAY BE A POST OFFICE BO	x)	
ming didness mile best of the box	<u> </u>	
	registered office address on our records, ente	r the name of the
stered agent and/or the new registered office	address here:	E 17
Name of New Registered Agent:	<u> </u>	- <del>가는</del>
New Registered Office Address:		ST 00
	Enter Florida street address	T .
	, Florida	7:1
	City	Zip Cride

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
MGR	Eric Stern	1440 SW 30th St Fort Lauderdale,	
			■ Remove
			Change
MGR	Jalil Isa	6538 Buckland Ct	■ Add
		Fort Washington, MD20744	Remove
			☐ Change
			Add
			☐ Remove
			Change
			🗆 Add
			Remove
			🗖 Change
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Effective date, if other than the of an effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the De	be specific and cannot be prior to date ock does not meet the applicable sta	(option of filing or more than 90 days after fitutory filing requirements, this continuous filing requirements.	ling.) Pursua	nt to 60 t be list	5.0207 ted as
ne record specifies a delayed The 90th day after the reco		ffective time, at 12:01 a.	m. on the	e earli	ier of
Dated	2017				
	ano Swift				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00