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(Re	equestor's Name)				
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J LEGGETT

	COVER LETTER
TO: Registration Division of C	
SUBJECT:	1508 SW 5TH COURT, LLC
	Name of Limited Liability Company
	entre de la companya de la companya La
The enclosed Articles	of Amendment and fee(s) are submitted for filing.
Please return all corres	pondence concerning this matter to the following:
	CHRISTOPHER HOWARD
	Name of Person
	1508 SW 5TH COURT, LLC
	Firm/Company
	1508 SW 5TH COURT
	Address
	FORT LAUDERDALE, FL 33312
	City/State and Zip Code CHRISTOPHER.HOWARD@MYMAIL.BARRY.EDU
	E-mail address: (to be used for future annual report notification)
For further information	concerning this matter, please call:
STEPHAN LIND	305 979-3121 at ()
Namo	of Person Area Code Daytime Telephone Number
Enclosed is a check for	the following amount:
S25.00 Filing Fee	☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status &

(additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Certified Copy (additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT

... TO

TO DESCRIPTION ARTICLES OF ORGANIZATION

OF

(Name of the Limited I	iability Company as it now appears of lorida Limited Liability Company)	n our records.)			
and the second of the second o			* * *,	,	,
The Articles of Organization for this Limited Liabi	lity Company were filed on 11/21/2017		and assigned		
Florida document number L17000240519	·				
This amendment is submitted to amend the following	ng:				
A. If amending name, enter the new name of the	e limited liability company here	:			
HOWARD INVESTMENTS GROUP, LLC					
The new name must be distinguishable and contain the words	s "Limited Liability Company," the desi	gnation "LLC" or the	abbreviation	ı "L.L.C.'	
Enter new principal offices address, if applicable	e:			©	
(Principal office address MUST BE A STREET A				FR	
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			*1.		,
Enter new mailing address, if applicable:			<u> </u>	<u>()</u>	-
<u> </u>			22.2	N	
(Mailing address MAY BE A POST OFFICE BO	<u></u>	,	- 14,1	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		ur records, ente	r the nat	ne of t	: <u>he</u>
Name of New Registered Agent:			•	•	
		-			
New Registered Office Address:	Enter Florida	a street address			
-	City	, Florida _	Zip Co	ode	
	c,		2.7		

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

	MGR = W AMBR = A	क्षेत्रियास्य ग्रह्माचीतः व िष्याच्यापृत्येकः स्वयाणाः		
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(0) 1110 3		2018				
Dated	APRIL 5TH	_,				
	APRIL 5TH	<u> </u>				
		a member or authorized repr	esentative of a member		7-	
			esentative of a member		ज	,
	Signature of	a member or authorized repr			ਸ	
	Signature of CHRISTOPHER HOWARD		Signee	no e mante carre e en	च - (48) (2	ione prime in the section

Filing Fee: \$25.00