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SECRITATION STATE
TALLAHASSEE, FLORIDA

AUG 13 2018

S. YOUNG

COVER LETTER

· TO: Registration S Division of Co						
Empire St	ate View 2000 LLC					
SUBJECT:	Name of Lin	nited Liability Company				
The enclosed Articles of	`Amendment and fee(s) are sub	emitted for filing.				
Please return all corresp	ondence concerning this matter	to the following:				
	Lewis M Oliver III					
		Name of Person				
	Oliver Title Law					
		Firm/Company				
	10967 Lake Underhill Rd.	, Suite 108		Ts:	- -	
		Address				
	Orlando, F1, 32825			ORE LANY OF LAHASSEE,	AUG 10	FIL
		City/State and Zip Code		SEE, F	0 P f	FILED
	E-mail address: (to be used for future annual report notifi	cation)	102 102 103 103 103 103 103 103 103 103 103 103	PH 6: 38	
For further information (concerning this matter, please c	all:		DA.	38	
Lewis M Oliver III		407 249-5050 at ()				
Name	of Person		Telephone Number			
Enclosed is a check for t	he following amount:					
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status		
Regist Divisi P.O. E	ING ADDRESS: ration Section on of Corporations 30x 6327 assee, FL 32314	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cer	n ations			

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Empire State View 2000 LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{11/27/17}{2}$ ____ and assigned Florida document number __L17000242647 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: ᇴ (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: 10967 Lake Underhill Rd., Suite 108 New Registered Office Address: Enter Florida street address

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.

Orlando

If Changing Registered Agent, Signature of Registered Agent

Existin

Page 1 of 3

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>	Name	Address	Type of Action
			Add
		a-	Remove
			Change
			Add
			Remove
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			AllASSEE, FOR Read O
			FILED COMPANDED OF SECULORIUM ALLAHASSEE, FLORIUM
			□ Remove
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			□ Remove
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			☐ Change

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Page 3 of 3

Filing Fee: \$25.00