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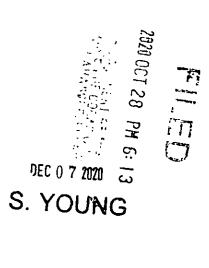
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COVER LETTER

	Registration Sec Division of Corp				
SUBJEC		AVENUE, LLC	v	•	
SUBJEC	1	Name of Lim	ited Liability Company	<u> </u>	
The enclo	sed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please ret	urn all correspor	ndence concerning this matter	to the following:		
		THOMAS F. CARNEY, JI	R		
Name of Person					
CARNEY STANTON P.L.					
Firm/Company					
135 S.E. 5TH AVENUE, SUITE 202					
			Address		
		DELRAY BEACH, FL 33-	483		
			City/State and Zip Code		
		E-mail address: (to be used for future annual report no	otification)	
For furthe	r information co	oncerning this matter, please ca	all:		
THOMAS	S F. ČARNEY, ,	JR	561 330-8140		
	Name of	Person	at () Area Code Dayti	me Telephone Number	
Enclosed	is a check for the	e following amount:			
≒ \$25.0	0 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)	
	i				
I I I	Mailing Address Registration S Division of Co P.O. Box 632 Tallahassee, F	ection orporations	Street Address: Registration S Division of Co The Centre of 2415 N. Mont	orporations Tallahassee oe Street, Suite 810	

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

	O1	~ >
		7020 OC
728 LAKE AVENUE, LLC		음 등
(Name of the Limited L (A F	lability Company as it now appears on our records.) lorida Limited Liability Company)	28
The Articles of Organization for this Limited Liabil	ity Company were filed on 12/12/2017	and assigned
Florida document number L17000253972	_ ·	6.
This amendment is submitted to amend the following	ng:	ω
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	::	
(Principal office address MUST BE A STREET A	DDRESS)	
Enter new mailing address, if applicable:		· · · · · · · · · · · · · · · · · · ·
(Mailing address MAY BE A POST OFFICE BO)	<u> </u>	
		
B. If amending the registered agent and/or regis agent and/or the new registered office address he		name of the new registered
	 -	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	<u> </u>
_	, Florid	aZip Code
New Registered Agent's Signature, if changing Regi	stered 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
AMBR	JD REALTY HOLDINGS, LLC	70 HUDSON STREET	□Add
		SUITE 5A	■Remove
		HOBOKEN, NJ 07030	5 0
			□Add
			□Remove
			□Change
			
			□Remove
			Change
			□Remove
			□Change
			□ Add
			□Remove
			□Change
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		·	□Remove
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effi <u>te:</u>	ve date, if other than the date of filing: October 21, 2020 (optional) ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ent's effective date on the Department of State's records.
s fil	
ed .	October 22 2020 Herrischer Lauthrijed representative (Registered Gent
	11 da 1 4 00 14 10 00 1

Filing Fee: \$25.00

Typed or printed name of signee