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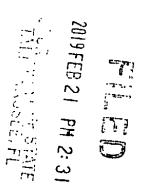
(Req	uestor's Name)	
(Add	ress)	
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(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Bus	iness Entity Nan	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	

Office Use Only



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R. WHITE FEB 2 C 2019

COVER LETTER &

TO:	Registration Sec Division of Corp			
CHITS #112	riegi.	OUTH AVENUE LLC		
SUBJEC	∍I; <u> </u>	Name of Lim	ited Liability Company	
The encl	osed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspon	ndence concerning this matter	to the following:	
		GERGES ESKANDR		
			Name of Person	
			Firm√Company	
		15102 PALMER LAKES (CIRCLE	
		NAPLES, FL 34109	Address	
		DIAN.M.EDWARDS@GM	City/State and Zip Code IAIL.COM	 -
		E-mail address: (to be used for future annual report no	dification)
For furth	ner information co	oncerning this matter, please ca	all:	
GERGE	S ESKANDR		239 2729370 at ()	
	Name of	Person		ne Telephone Number
Enclosed	d is a check for th	e following amount:		
ವ \$25.	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)

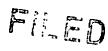
MAILING ADDRESS:

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



2019 FEB 21 PM 2: 31

CRISPY SOUTH AVE LLC

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

	11 (OLE, FL
were filed on 12/14/2017	and assigned
oility company here:	
ility Company," the designation "LLC" or	the abbreviation "L.L.C."
office address on our records, e	nter the name of the
<u>re</u> :	
<u>re</u> :	
<u>re</u> : 	
Enter Florida street address	
Enter Florida street address	laZip Code
	pility company here: ility Company," the designation "LLC" or

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_bein or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Act
MGR	GEORGE SALAMA	7806 EMERALD CIRCLE #204 NAPLES, FL 34109	
			= Remove
			Change
			Remove
			Change
			Remove
			Change
			Add
			☐ Remove
			Change
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		Remove	
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			Add
		· · ·	☐ Remove
			Change

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	·		
Effective date, if other than the (If an effective date is listed, the date must	date of filing:	o date of filing or more than 90	(optional)
Note: If the date inserted in this blo	ock does not meet the applica	ble statutory filing requirer	nents, this date will not be listed
document's effective date on the De	partment of State's records.		
the record specifies a delayed	effective date, but not	an effective time, at	12:01 a.m. on the earlie
) The 90th day after the reco	ord is filed.		
FFRRHARY 18	2019		
Dated		_· _	
	/. /	Cott 100	
	Signature of a member or author	Macket of a manufacture	ner .
	Signature of a member or autho	nze a roprosenta tive of a memi	
GERGES ESKANDR			

Page 3 of 3

Filing Fee: \$25.00