P. 001

Florida Department of State

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PARC CENTRAL B LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| PARC CENTRAL B LLC | <u></u> | |
|--|--|---------------|
| (Name of the Limited Lia (A Flo | ability Company as it now appears on our records.) orida Limited Liability Company) | |
| The Articles of Organization for this Limited Liabilit Florida document number L18000002941 | ry Company were filed on 01/04/2018 and assigned | |
| | - - | |
| This amendment is submitted to amend the following | ž. | |
| A. If amending name, enter the new name of the | limited liability company here: | |
| | "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." | |
| The new name must be distinguishable and contain the words | Limited Examiny Company, and designation and of development and | |
| Enter new principal offices address, if applicable: | | — |
| (Principal office address MUST BE A STREET AL | ODRESS) | |
| | 22 | |
| | - 20 H | |
| Enter new mailing address, if applicable: | | |
| (Mailing address MAY BE A POST OFFICE BOX | | - |
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| | i i i i i i i i i i i i i i i i i i i | A ne |
| B. If amending the registered agent and/or registered agent and/or the new registered office | egistered office address on our records, enter the name of the | e no |
| registered agent and/or the new registered office | address acre. | |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| INEM ICEBIOLO OTHER TRANSPORT | Enter Florida street address | |
| | , Florida | |
| | City Zip Code | |

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> | Name | Address | Type of Action |
|---------------|-------------------------|-------------------|--|
| AM8R | MARCELO BLAYA | 7400 W FLAGLER ST | 🖸 Add |
| | | MIAMI, FL 33144 | B Remove |
| | | | ☐ Change |
| AMBR | LETICIA BLAYA FORNATADO | 7400 W FLAGLER ST | |
| | | MIAMI, FL 33144 | 🖺 Remove |
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| D. If smeading any other information, enter changets) here: (Attach additional sheets, if necessary) | | |
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| E. Effective date, if other than the date of filing: (1) as effective due is inted, the date must be specific and counse be prior to day of fining or more than 70 days after Bling.) Purposes to 600 Note: If the date instanted in this block does not meet the applicable manuary fitting requirements, this date will not be listed documents's effective time on the Departments of State's records. | अद्याग () प्रोक्षम सर्वे ४४ चंद्रः | |
| If the record specifies a delayed effective date, but not an effective time, bt 12:01 a.m. on the earlie (b). The 90th day after the record is filed. | er of: | |
| Dated 07/08 2016 Dated Parameter of a parameter of | | |
| CARMEN M. PETERS, CPA | | |
| THE REPORT OF THE PROPERTY OF | | |

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