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(City/State/Zip/Phone #)	
(Business Entity Name)	-
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Certified Copies Certificates of Status	-
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Special instructions to Fining Officer.	

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Registration Section TO:

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Division of Corporations

Hardwood Hammock 3 LLC

SUBJECT:

P.O. Box 6327

Tallahassee, FL 32314

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Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

	Greg Goldstein			
	Name of Person			
		Firm/Company		
	1203 Asturia Ave		_	
	Coral Gables, FL 33134	Address		
	greggoldstein@bellsouth.ne	City/State and Zip Code		
		to be used for future annual report noti	fication)	
For further information c Greg Goldstein	oncerning this matter, please c	an: at ()		
Name o	f Person	Area Code Daytim	ne Telephone Number	
Enclosed is a check for the	he following amount:			
■ \$25.00 Filing Fee	S30.00 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 Addres		<u>Street Address:</u> Registration Se	ection	
Registration Section Division of Corporations		Division of Corporations		

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Hardwood Hammock 3, LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny <u>as it now appears on our records.</u>) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liab</u>	<u>ility company here</u> :	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1203 Asturia Ave	2020
(Principal office_address MUST_BE A STREET ADDRESS)	Coral Gables, FL 33134	HU11 211
Enter new mailing address, if applicable: (<u>Mailing address MAY BE A POST OFFICE BOX)</u>	1203 Asturia Ave Coral Gables, FL 33134	PM 12: 57
and an of the price of the point		

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> agent and/or the new registered office address here:

Name of New Registered Agent:	Greg Goldstein		
New Registered Office Address:	1203 Asturia Ave		
	Enter Florida street address		
	Coral Gables	. 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.

Registered Agent, Signature of New Re If Cha gistered 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
MGR	Greg Goldstein	1203 Asturia Ave	
			🖸 Add
		Coral Gables, FL 33134	
			🖬 Change
MGR	Jennifer Goldstein	1203 Asturia Ave	
			🗆 Add
		Coral Gables, FL 33134	
			🗆 Remove
			🖻 Change
AP	Debbie Terzian	31 Angelfish Cay Dr	
<u>_</u>			Add
		Key Largo, FL 33037	Add Remove
			Remove
			· f m
		. <u></u>	
AP	Nelson Terzian	31 Angelfish Cay Dr	
			یں ایک ایک
		Key Largo, FL 33037	
			🖬 Remove
			Change
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			□Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated	Nov.	20 2020	
		Child	
		Signature of a member or authorized representative of a member	<u> </u>
		Greg Goldstein	
	<u></u>	Typed or printed name of signee	

Filing Fee: \$25.00