## L18000065868

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
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## **COVER LETTER**

Registration Section

Tallahassee, FL 32314

TO:

Division of Cor	rporations								
AWH&T I	nvestment LLC								
SUBJECT:									
	Name of Limi	ted Liability Company							
The enclosed Articles of	Amendment and fee(s) are sub	nitted for filing.							
Please return all correspo	ondence concerning this matter t	to the following:							
	-	3							
	Tom Assouline								
		Name of Person	<u></u>						
	City/State and Zip Code  assouline tom@gmail.com  E-mail address: (to be used for future annual report notification)  attion concerning this matter, please call:    Sale   Sale								
		Firm/Company	<u> </u>						
	2858 N University Dr								
		Address							
	Coral Springs, FL 33065								
	_	o ha used for future annual capart a	otification)						
Day Camban in Commention	·	•	ouncations						
Tom Assouline	concerning this matter, please co								
rom Assounce									
Name (	of Person	Area Code Day	time Telephone Number						
Enclosed is a check for t	he following amount:								
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee &	Certified Copy	Certificate of Status & Certified Copy						
Mailing Addre									
Registration		Registration S							
Division of C P.O. Box 633		Division of Corporations The Centre of Tallahassee							

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AWH&T Investment LLC	7970 2TV 13	Pl: 1: 13
(Name of the Limited Liability (A Florida Li	Company as it now appears on our r imited Liability Company)	ecords.)
The Articles of Organization for this Limited Liability Cor Florida document number L18000065868	mpany were filed on March 13, 2	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	d Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<del></del>
(Principal office address MUST BE A STREET ADDRE	<u></u>	<u> </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	office address on our records, g	enter the name of the new regist
Name of New Registered Agent:		
New Registered Office Address:	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 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 2.120 SE 110 PH 1: 13	Type of Action
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			Remove
			□Change
	William Assouline		□Add
	<del></del>	2858 N University Dr, Coral Springs, FL 33065	■Remove
		<del> </del>	BRCHOVE
			□Change
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record specifies is filed.	a delayed eff	ective date,	but not a	ın effecti	ive time,	at 12:01	a.m. on	he earli	er of: (	b) The	90th day	after the
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		Signati	ire wia d	ember or	authorize	d represe	ntative of a	membe	r	<u>-</u> -		_

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