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er the email address for this business entity to we work annual report mailings. Enter only one small address please.**. **Enter the email address for this business entity to be used for future

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EXAMINER

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12/20/2018

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		W4TH LLC				
(Name of the L.	(A Florida Limited	nny sa it now appear Liability Company)	s on our records,)	· -		
The Articles of Organization for this Limited Florida document number Li 8000075802	d Liability Company	y were filed on	03/23/2018	and a	s signed	
This amendment is submitted to amend the f	ollowing:					
A. If sincoding name, enter the new name	e of the limited liab	oility company he	<u>re</u> :			
N/A						
The new name must be distinguishable and contain the	o words "Limited Liabi	ility Company," the de	signation "LLC" or the	abbreviation "	L.L.C."	_
Enter new principal offices address, if app		N/A				
(Principal office address MUST BE A STR.	EET ADDRESS)				910	
				14.	_ <u>문</u>	
Enter new mailing address, if applicable:		718 SW 13TH A	VE	22	£ 20	
Mailing address MAY BE A POST OFFIC	E BOX)	MIAMI, FL 331:	35		E	— <u>;</u> ;
				95	Ċ	_(_
B. If amending the registered agent an	*			Company Compan	61	
B. If amending the registered agent an registered agent and/or the new registered	office address her	ffice address on g:	our records, enter	r the name	of the	<u>new</u>
Name of New Registered Agent:	N/A					
New Registered Office Address:	N/A					_
1		Enter Florid	da street address			_
	N/A		. Florida			
1						

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 Title Name <u>Address</u> Type of Action 718 SW 13 AVE MGR LILIANET PELEGRIN MIAMI, FL 33135 . ■ Add □ Remove ☐ Change 637 SW 11 ST APT 5 MGR ALICIA PEREZ MIAMI, FL 33129 ■ Add ☐ Remove D A SEP Remove Charge _C Add □ Remove ☐ Change _∐ Add _□ Remove _□ Change _□ Remove

□ Change

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	/	Signature of a member	or authorized repre	scrittive of a member		
		LILIANET PELEGRIN				
		Typed o	or printed name of	nignae		

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