Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000247885 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

: COMITER & SINGER, LLP Account Name

Account Number : 12000000085 Phone

: (561)626-4742

Fax Number

: (561)626-4742

Enter the email address for this business entity to be used for futureannual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ML INVESTOR MANAGEMENT, LLC

G 18 00	
Certificate of Status	U
Certified Copy	1
Page Count	04
Estimated Charge	\$55.00

Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY AUG 22 2019

H19600247885

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ML INVESTOR MANAGEMENT, LLC	7
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on 04/23/2018 Florida document number L18000102216	and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
ICARMANDIAS HOLDINGS LLC	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enteregistered agent and/or the new registered office address here:	er the name of the
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 provisions of all statutes relative to the proper and complete performance of my duties, and I a accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. (being filed to merely reflect a change in the registered office address, I hereby confirm that the	m familiar with and Or, if this document

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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 = A	uthorized Member		
Title	<u>Name</u>	Address	Type of Action
			□ Remove
	•		Change
			O Remove
			□ Change
			Change 2:
			Remove
			Change
			□ Abd
			☐ Remove
			☐ Change
			Add
			Remove
			Change
			
			☐ Remove

		19 Ā
	22	AUG ?
		21
	1.*	王
		2: 2:
	<u> </u>	714
Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and carnot be prior to date of filing or more than 90 days at Note: If the date inserted in this block does not meet the applicable statutory filing requirements, it document's effective date on the Department of State's records.	otional) Berfiling.) Pursuant to 605. his date will not be liste	0207 (3)(d aş the
the record specifies a delayed effective date, but not an effective time, at 12:0: b). The 90th day after the record is filed.	I a.m. on the earlie	r of:
Dated August 19, 2019.		
- Dear		
Signature of a member or authorized representative of a member		
Merick Lewin, Manager		

Page 3 of 3

Filing Fee: \$25.00