118000120280

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(Business Entry Name)
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COVER LETTER

	Registration Sec Division of Corp							
SUBJEC	LN & AY R							
SUBJEC	· 1 :	Name of Limited Liability Company						
The enclo	osed Articles of A	Amendment and fee(s) are sub	mitted for filing.					
Please ret	turn all correspor	dence concerning this matter	to the following:					
		RON ABRAHAM						
			Name of Person	<u>. </u>				
		KSDT & COMPANY						
			Firm/Company					
		1625 N COMMERCE PKWY SUITE 315						
	Address							
		WESTON, FL 33326						
			City/State and Zip Code	·				
		RABRAHAM@KSDT-CP/						
For furthe	er information co	ncerning this matter, please ca	to be used for future annual report notif	ication)				
	DE LA TORRE							
	Name of	Person	305 670-3370 at () Area Code Daytime	Telephone Number				
Enclosed	is a check for the	e following amount:						
\$ 25.0	0 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 ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LN & AY RE 2 LLC		
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records.) iability Company)	
he Articles of Organization for this Limited Liability Company	were filed on 05/14/2018	and assigned
lorida document number L18000120280		v
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liabi	lity company here:	
he new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the	e abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		<u>_</u>
		2
nter new mailing address, if applicable:		· ·
Mailing address MAY BE A POST OFFICE BOX)		呈
runing university to the total configuration of the transfer o		<u></u>
		ာ
If amending the registered agent and/or registered offeegistered agent and/or the new registered office address here		er the name of the
Name of New Registered Agent:		<u> </u>
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 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>	<u>Name</u>	Address	Type of Action
MGR	CRISTINA SARRIA	1625 N COMMERCE PKWY	
		SUITE 315	□ Add
			■ Remove
		WESTON, FL 33326	5 8
	JORGE DE LA TORRE	9300 S DADELAND BLVD	☐ Change
MGR			
		SUITE 600	<u></u>
		MIAMI, FL 33156	☐ Remove
			Change.
			- 基 つ
			ى كى
			Change
	· · · · · · · · · · · · · · · · · · ·		Add
			☐ Remove
			L Remove
			Change
			Remove
			☐ Change
			
			□ Remove
			Aremore
			□ Change

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	<u> </u>
. Effective	e date, if other than the date of filing: (optional)
(If an effect	tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed
documen	it's effective date on the Department of State's records.
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 10th day after the record is filed.
) me 9	oth day after the record is filed.
Dated N	9OV -2 2018
Dated	
Dated	Signature of a member of approprized representative of member

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Filing Fee: \$25.00