118000123200

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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 933 NW 2 Ave LLC 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.
Name of Person
RES Elite Development Inc.
3389 Shoridan St. #513
City/State and Zip Code City/State and Zip Code E-mail address: (to be used for turne annual reportunitication)
For further information concerning this matter, please call:
Name of Person at (954) 288-1986 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Scrifficate of Status Certificate of Status Cert

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

0133 NV	12 Ave LL	<u>_C</u>
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	i <mark>ny as it now appears on our reco</mark> Liability Company)	<u>rds.</u>)
The Articles of Organization for this Limited Liability Company Florida document number <u>L18000123200</u> .	were filed on May 16,	2018 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LI	.C" or the abbreviation "L.IC."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		18 IVIS
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		21 21
Enter new mailing address, if applicable:	• • • • · · ·	
Mailing address MAY BE A POST OFFICE BOX)		1 00 00 00 00 00 00 00 00 00 00 00 00 00
		F 100
3. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		ds, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addr	ess
		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 of removed from our records:

MGR = Manager

AMBR = Authorized Member <u>Title</u> **Type of Action** Name Address MGR RES Elite Development Inc. 3389 The cidan A.#513 0 Add Hollywood, FC 33021 □ Change MGR Jenny Thomas 3389 Theridan St. #573 DAdd
1/6/1/wood, F 33021 - Rema ☐ Change □ Add ☐ Remove ☐ Change □ Add □ Remove Change □ Add ☐ Remove ☐ Change □ Add □ Remove

☐ Change

	
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ective date, if other than the date of filing: In effective date is listed, the date must be specific and cannot be prior to date of filing or more to the date inserted in this block does not meet the applicable statutory filing recument's effective date on the Department of State's records.	(optional) han 90 days after filing.) Pursuant to 605.020 quirements, this date will not be listed a
record specifies a delayed effective date, but not an effective time the 90th day after the record is filed.	e, at 12:01 a.m. on the earlier o
led Jime 19 . 2018	

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