118000123743

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COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT:	Reinvint (Company LL ited Liability Company	C
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Martin	Name of Person	
		Name of Person	
		d Company	
		Firm/Company	<u> </u>
	2875 NE	191st Street	Juite 703
		City/State and Zip Code Code to be used for future annual report notion	
	E-mail address: (to be used for future annual report noti	PH. LOB fication)
For further information co	oncerning this matter, please ca	all:	
Martin K.	oth band Person	at (305) 937 Area Code Daytim	r - 0330 e Telephone Number
Enclosed is a check for the	e following amount:		
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy tadditional 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**

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
(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 $\frac{M_{eq} 15,7018}{L18000123743}$ and assigned	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
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:	ζ:
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, enter the name of the registered agent and/or the new registered office address here:	1 <u>0</u>
Name of New Registered Agent:	_
New Registered Office Address: Enter Florida street address	-
	•
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 for removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	Lauren Millsaps	100 Kings Point Driv North Miami Beach,	1e, 715 PAdd FL 33160
			Remove
			Change
AMBR	Martin Rothbard	100 Kings Point Drive.	
		North Miami Beach,	FL 33160 TRemove
			□ Change
			Add
			□ Remove
			Change
			Add
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ective date, if other than effective date is listed, the dat	the date of filing: te must be specific and cannot	be prior to date of filing o	r more than 90 days after fili	al) ing.) Pursuant to 605.0
e: If the date inserted in the	is block does not meet the he Department of State's r	e applicable statutory ti	ling requirements, this da	ate will not be listed
	ayed effective date, t	out not an effectiv	e time, at 12:01 a.n	n. on the earlie
he 90th day after the	record is filed.			
ed May 30	. 2	018 1		
30	Signature of a rhember			
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00