## L/800139517

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## **COVER LETTER**

TO: Registration Se Division of Cor	
	2 Avenue, LLC
SUBJECT:	Name of Limited Liability Company
The enclosed Articles of	Amendment and fee(s) are submitted for filing.
Please return all correspo	ndence concerning this matter to the following:
	Michael J. Pardo, Esq.
	Name of Person
	Pardo Jackson Gainsburg, PL
	Firm/Company
٠	200 SE 1st Street. Suite 700
	Address
	Miami, Florida 33131
	City/State and Zip Code
	jb@pardojackson.com  E-mail address: (to be used for future annual report notification)
For further information of	oncerning this matter, please call:
Michael J. Pardo, Esq.	305 358-1001
Name o	TPerson Area Code Daytime Telephone Number
Enclosed is a check for the	e following amount:
\$25.00 Filing Fee	\$55.00 Filing Fee & S60.00 Filing Fee,  Certificate of Status & Certified Copy (additional copy is enclosed)  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

7127 NW 2 Avenue, LLC		
( <u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our records.) ted Liability Company)	
he Articles of Organization for this Limited Liability Comp	any were filed on6/5/2018	and assigned
lorida document numberL18000139517		•
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited	is submitted to amend the following:  name, enter the new name of the limited liability company here:  be distinguishable and contain the words "Limited Liability Company," the designation "L.C." or the abbreviation "L.C." expal offices address, if applicable:  address MUST BE A STREET ADDRESS)  ing address, if applicable:  a MAY BE A POST OFFICE BOX)  g the registered agent and/or registered office address on our records, enter the name of the new rand/or the new registered office address here:	
ne new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" o	or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS	<u> </u>	·
		<del></del>
		<b>=</b>
nter new mailing address, if applicable:		
nter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX</u> )		
	_	
	-	and the same
If amending the registered agent and/or registered	d office address on our records,	enter the name of the n
gistered agent and/or the new registered office address	here:	- N
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	·
	, Flori	ida
	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>	<u>Address</u>	Type of Action
MGR	Matthew Vander Werff	7338 NW Miami Court	
		Miami, FL 33150	■ Remove
			Change
MGR	Justin Schultz	_	
		Miami, FL 33150	■ Remove
			Change
MGR	GEGP, LLC	7338 NW Miami Court	■ Add
		Miami, FL 33150	□ Remove
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			Add
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fective date, if other than t	he date of filin	6/22/18		(opt	tional)	
n effective date is listed, the date note: If the date inserted in this	nust be specific an	d cannot be prior	to date of filing or	more than 90 days aft	er filing.) Pursu	ant to 605.0
cument's effective date on the	Department of	State's records.	abic statutory in	ing requirements, tr	ns date will in	ot be fisted
record specifies a delay The 90th day after the re	ed effective (	date, but no	t an effective	time, at 12:01	a.m. on th	e earlie
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ned June 22		2018	>			
med	<del></del>		<del>_</del> '			
	M	oth				
	Signature of a	member or author	orized representati	ve of a member		

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Filing Fee: \$25.00