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COVER LETTER

	Registration Sec Division of Corp				
enn nec		unsj Holding, LLC			
SUBJEC	1:	Name of Limi	ted Liability Company		
. The enclo	sed Articles of A	Amendment and fee(s) are sub-	nitted for filing.		
Please ret	urn all correspor	ndence concerning this matter t	to the following:		
		Melissa Vander Voord			
			Name of Person		
		Sun Trust Title, LLC			
			Firm/Company		
		429 Lenox Avenue, Suite 5	4)		
			Address		
		Miami Beach, FL			
		mv@gosuntrust.com	City/State and Zip Code		ره) المسر دد)
		E-mail address: (t	o be used for future annual report notific	cation)	තු වුනු නි යනු
For furthe	er information co	oncerning this matter, please ca	dl:		
Melissa V	Vander Voord		305 672-1222		
	Name of	Person	at () Area Code Daytime	Telephone Number	STATE SESTION 3: 50
Enclosed	is a check for th	e following amount:			57
\$25.0	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee Certificate of Sta Certified Copy (additional copy is er	itus &

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

oility Company as it now appears on our records.)
Company were filed on 7/27/2018	and assigned
·	
:	
imited liability company here:	
Limited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
DRESS)	
	10 120 m
gistered office address on our records, <u>ddress here</u> :	enter the name-of the new
Enter Florida street address	
, Flo	rida Zıp Code
	mited liability company here: imited Liability Company," the designation "LLC" DRESS) gistered office address on our records, ddress here: Enter Florida street address, Flo

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	Melissa Vander Voord	429 Lenox Avenue, Suite 541 Miami Beach, FL 33139	= Add
			Remove
			Change
			□ Remove
			☐ Change
			□ Remove
			Change
			□ Add
			☐ Remove
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			Add
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			Remove
			Change

	 			
				
			<u>-</u>	
	03/04/2015	1		
ective date, if other than the or refrective date is listed, the date must			(optional)	
te: If the date inserted in this blo	ock does not meet the appli-	cable statutory filing req	an 90 days after filing.) Pursuant t uirements, this date will not b	o 605.020 e listed a
nument's effective date on the De	partment of State's records	s.		
record specifies a delayed	effective date, but no	nt an effective time	at 12:01 a.m. on the e	arlier i
The 90th day after the reco		oc arr ciraciro cimo		
March 13th	2019			
March 13th ted		·		
		\sim		
	Signature of a member or auth	norized representative of a	nember	

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