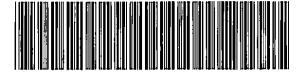
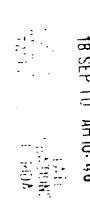
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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE 379482 7446854 AUTHORIZATION COST LIMIT : \$ 25.00 ORDER DATE: September 10, 2018 ORDER TIME: 10:22 AM ORDER NO. : 379482-005 CUSTOMER NO: 7446854 DOMESTIC AMENDMENT FILING NAME: URBIN COMMODORE, LLC EFFECTIVE DATE: XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: ___ CERTIFIED COPY ___ PLAIN STAMPED COPY _____ CERTIFICATE OF GOOD STANDING CONTACT PERSON: Emily Croft -- EXT# 62925

EXAMINER'S INITIALS:

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT:Cy	bin Comnod Name of Limi	leve LLC	
The enclosed Articles of A	mendment and fee(s) are sub-	nitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Henne	Name of Person	
	(3000/4/1	Firm/Company).A
	8461 5	W 144 Street	
	Palmette	Bay, FL 3315 City: State and Zip Code	5
	E-mail address: 0	to be used for future annual report notifies	ation)
For further information co	ncerning this matter, please ca	ut):	
Howath f	-LCyr.O Person	at (<u>75%</u>) <u>11) 3 - S</u> Area Code Daytime T	C(1) Felephone Number
Enclosed is a check for th	e following amount:		
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	S60,00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2001 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)
the Articles of Organization for this Limited Liability Company were filed on $8/16/18$ and assigned orida document number 418000197013 .
his amendment is submitted to amend the following:
If amending name, enter the new name of the limited liability company here: Company Company
nter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)
. If amending the registered agent and/or registered office address on our records, enter the name of the neegistered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address: Enter Florida street address
, Florida
Cav Zip Code
lew 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 = M $AMBR = A$	lanager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
<u> 1612</u>	Right Mageon	2665 S. Buyshave Drive	Add
		Soite 1101	
		Cound Gar, FC 33133	□ Change
			D Add
			☐ Remove
			D Change
<u>MGR</u> ——	Urbin, LLC	2665 5 Baythere Orive	_ Add
		Solde 1101	☐ Remove
		Cocond Give, Fr. 33133	O Change
			_ □ Add
			Response T L E
			_ CD_Add
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	l specifies a th day after				t not an	effective	time, at	12:01 a.	m. on ti	ne earlier
ied	Sept. 1	7		. <u>J()</u>	<u>S</u> .					
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Page 3 of 3

Filing Fee: \$25.00