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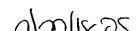
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COVER LETTER

TO:	Registration Se Division of Cor						
	1108 Rio, I						
SUBJE	C1:	Name of Limited Liability Company					
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please re	eturn all correspo	ndence concerning this matter	to the following:				
		Cabot Edewaard					
		Edewaard Holdings, LLC	Name of Person				
		1998 E Sunrise Blvd	Firm/Company				
	3						
			City/State and Zip Code				
		E-mail address: (to be used for future annual report notif	fication)			
For furth	her information c	oncerning this matter, please co	all:	••			
Cabot l	dewaard		954 214-0939 at ()	$\frac{N}{2}$			
	Name o	f Person	Area Code Daytime	e Telephone Number			
Enclosed	d is a check for th	ne following amount:					
\$25.	.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 Status & Certified Copy (additional copy is enclosed)			
	Registr Divisio	ING ADDRESS: ation Section n of Corporations ox 6327	STREET/COURI Registration Section Division of Corpor Clifton Building	n			

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1108 Rio, LLC (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 ______ and assigned L18000204950 Florida document number 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 "L.L.C." 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: (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 new registered agent and/or the new registered office address here: 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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	EDC 3, LLC	1998 E Sunrise Blvd Ft Lauderdale, FL 33304	Add
			■ Remove
	PNA A LL G		
MGR	EDC 4, LLC	1998 E Sunrise Blvd Ft Lauderdale, FL 33304	Add
			Remove
			Add
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fective date, if other than the date of filing:		(option	al)
n effective date is listed, the date must be specific and cannote: If the date inserted in this block does not meet to cument's effective date on the Department of State's	the applicable statutory t	or more than 90 days after fil iling requirements, this d	ing.) Pursuant to 605,02: ate will not be listed a
record specifies a delayed effective date The 90th day after the record is filed.	, but not an effectiv	e time, at 12:01 a.n	n. on the earlier
september 6	2018		
		/	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00