Division of Corporations Electronic Filing Cover Sheet

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From:

Ľ.

: JORGE L. GURTAN P.A. Account Name

Account Number : I20010000123 Phone

: (305)931-0541

Fax Number

: (305)931-0568

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN THE HARBOUR 1916 TS LLC

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A. LUNT

Electronic Filing Menu

Corporate Filing Menu

Help

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

THE HAR	BOUR 1916 TS LLC		
(Name of the Limited Liability (A Florida)	Company as it now app Cimited Liability Compan	ears on our records.)	<del></del>
The Articles of Organization for this Limited Liability Co Florida document numberL18000219760			and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ed liability company	here:	,
The new name must be distinguishable and contain the words "Limit	red Liability Company," th	ne designation "LLC" or the ab	brevlation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDR.	ESS)		9
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)			SSE TOUR
B. If amending the registered agent and/or registered agent and/or the new registered office addr	ered office address ess here:	on our records, enter	the name of the ven
Name of New Registered Agent:			
New Registered Office Address:	Enter	Florida street address	
		. Florida	
	Clty		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>	Name	Address	Type of Action
MGR	VENELA CORP	1805 PONCE DE LEON BLVD.	
		SUITE 400	Remove
		CORAL GABLES, FL 33134	Change
MGR	RICARDO J. GRANILLO	1805 PONCE DE LEON BLVD.	
		SUITE 400	Remove
		CORAL GABLES, FL 33134	Change
			Remove BB
			AND AND SON RESIDENCE
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			Change
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		delayed effect the record is f		not an effect	dive time, at 1	2:01 a.m. or	n the earlier o
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