Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

ACCOUNT Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)694-1639

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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 115 WEST 49TH STREET, LLC

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2019 E. 1250 P. 11.20

3/28/19, 3:59 PM

3/29/19 05

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	115 WEST 49TH STREET, LCC	
(Name of the Limited	d Liability Company as it now appears on our records. A Florida Limited Liability Company)	<u>)</u>
(A Florida Limited Liubility Company)	دء
The Articles of Organization for this Limited Lia	ibility Company were filed on OCTOBER 17, 201	and assigned
THE ATTROCES OF CALEBRATION FOR THE DATABLE DA		
Florida document number L18000243998	·	
•		
This amendment is submitted to amend the follow	wing:	
		7. T 🗂
A. If amending name, enter the new name of	the limited liability company here:	7 00
AMENDOLA P	ROPERTIES LLC	(C) (Q)
The new name must be distinguishable and contain the wo	ords "Limited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applies		
(Principal office address MUST BE A STREE	TADDRESS)	<u> </u>
	•	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		
(Manual anales) MALI BEALOGI WILLIAM	<u></u>	
		
n its amending the registered agent and/	or registered office address on our records	, enter the name of the new
B. If amending the registered agent and registered agent and/or the new registered of	fice address here:	
registeren agent and/of the new registered of	Het attricts House.	
		٠,
St. SST. Defitioned Aposts	• ;	
Name of New Registered Agent:		
Now Deviatored Office Address:	· · · -	
New Registered Office Address:	Enter Florida street addres	5
		,
	, Flo	orida
	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 Agend Signature of New Registered Agent

Page 1 of 3

If amending Anthorized 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
AMBR	AMENDOLA, MARCO BEATRIZ, JTBE	270 VELEROS COURT	Add -T
		CORAL GABLES, FL. 33143	Remove
			O Chunge (
мgr	AMENDOLA, MARCO	270 VELEROS COURT	çο (Addr
		CORAL GABLES, FL. 33143	∐ Remove
			Change
MGR	AMENDOLA, BEATRIZ	270 VELEROS COURT	🙀 Add
		CORAL GABLES, FL. 33143	□ Remove
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MARCH 7,		Bee	. M	Am	1
Sign	iture of a member or	authorized representat	Ive gra member	<u> </u>	
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