## L18000244899

	(Requestor's Name)				
	(Address)				
	(Address)				
	(City/State/Zip/Phone #)				
	PICK-UP WAIT MAIL				
	(Business Entity Name)				
	(Document Number)				
	Certified Copies Certificates of Status				
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W.:

## **COVER LETTER**

TO:	Registration Se Division of Cor						
ethur	imperial.						
SUBJECT: Name of Limited Liability Company							
The encl	losed Articles of .	Amendment and fee(s) are sub	mitted for filing.				
Please re	cturn all correspo	ndence concerning this matter	to the following:				
		Barry E. Haimo, Esq.					
			Name of Person				
		Haimo Law					
Firm/Company							
	8201 Peters Road, Ste 1000						
			Address				
	Plantation, FL 33324						
			City/State and Zip Code				
doc@haimolaw.com  E-mail address: (to be used for future annual report notification)							
For furth	ner information co	oncerning this matter, please ca		,			
Barry E.	. Haimo, Esq.		954 599-7483				
Name of Person			at () Area Code	lephone Number			
Enclosed	l is a check for th	e following amount:					
<b>■</b> S25.	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, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

IMPERIAL POINT 2124 LLC			
( <u>Name of the Limited Liability Cop</u> (A Florida Limit	npany as it now appears on our records. ed Liability Company)	<b>)</b>	
The Articles of Organization for this Limited Liability Compa $\frac{1.18000248899}{2}$ .	any were filed on 10/23/2018	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	ability company here:		
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC"	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 offic igent and/or the new registered office address here:	e address on our records, <u>enter th</u>	ne name of the new regis	
agent and/in the new registered office address here.			
Name of New Registered Agent:		:	
New Registered Office Address:	Enter Florida street address	<del></del>	
	Emer Canada sirver adaress		
<del></del>	, Flor	idaZip Code	
	2.10	ray v come	

## 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	GFR Property Management, LLC	1950 N.E. 6th Street	
		POMPANO BEACH, Ft. 33060	■Remove
			]Change
MGR	GFR Management, LLC	1950 N.E. 6th Street	
		POMPANO BEACH, FL 33060	□Remove
			□Change
			□Add
		<del></del>	□Remove
			□Change
		-	
		-	□Remove
			•
			<del></del>
			□Remove
			□Change
		<del></del>	□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the record is filed. Dated \_\_\_\_\_ 6-(4.) 9 1. Signature of a member or authorized representative of a member, Barry E. Haimo, Esq. Typed or printed name of signee

Filing Fee: \$25.00