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COVER LETTER

TO:

Registration Section

Division of Corp			
SUBJECT: Sigh	Delameres O Name of Lin	F North Broward ited Liability Company	MBoxa Raton, LLC
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Sign Dr	Name of Person Carrers of N Brown Firm/Company	rand & Boca Raton
	6354	NW 93rd Dr. Address	
	Parklai	City/State and Zip Code Cocasiand Reamers October 1988 1988 1988 1988 1988 1988 1988 198	······
	E-mail address:	ocasishdreamers Q O (to be used for future annual report notifi	mail. com
For further information co	oncerning this matter, please c	all:	
Caryna C	Person	at (<u>954</u>) <u>(401-5</u> Area Code Daytime	5405 Telephone Number
Enclosed is a check for the	e following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Section Status & Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations	Street Address: Registration Sectorial Division of Corporate The Centre of Ta 2415 N. Monroe Tallahassee, FL.	orations Dullahassee Street, Suite 8104

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sign Dreamers of North (Name of the Limited Liability Compan (A Florida Limited Li	Broward & Boca Raton A possit now appears on our records.) Broward & Boca Raton Broward & Boca Raton
The Articles of Organization for this Limited Liability Company of Florida document number <u>L18000251789</u> .	were filed on $10 25 2018$ and assigned
This amendment is submitted to amend the following:	
This affendment is submitted to affend the following.	
A. If amending name, enter the new name of the limited liabil	lity company here:
N/A	
The new name must be distinguishable and contain the words "Limited Liability"	_
Enter new principal offices address, if applicable:	6354 NW 93rd Dr.
(Principal office address MUST BE A STREET ADDRESS)	Parkland, FL 33067
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 here:	ddress on our records, enter the name of the new registered
Name of New Registered Agent: Carina	Carenerou
New Registered Office Address: 635	54 NW 93rd DR.
Parckle	Enter Florida street address Florida 3900 City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete procept the obligations of my position as registered agent as publing filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and I am fāmiliar with and rovided for in Chapter 605, F.S. Or if this document is

If Changing Registered Agent, Signature of New Ragistered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added</u> or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Lyndsey Inbert	8060 NW 126+ Tex.	□Add
		8060 NW 126+ Tex. Parkland, FL 33076	Remove
			□Change
			□Add
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