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COVER LETTER

SUBJECT:	EACH 1525, LLC		<u> </u>
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Alexandre Ballerini, Esq.		
		Name of Person	
	Alexandre Ballerini, P.A.		
		Firm Company	
	100 S.E. 2nd Street, Suite	3400	
		Address	
	Miami, Fl. 33131		
	alex(@alexballerinilaw.com	City/State and Zip Code	
	E-mail address: (to be used for future annual report no	otification)
For further information of	concerning this matter, please co	all:	
Alexandre Ballerini		305 375 9220	
Name (of Person	Area Code Dayti	me Telephone Number
Parallel St. of the other and	L. C.H		
Enclosed is a check for t			-
■ \$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
MAIL	ING ADDRESS:	STREET/COUR	RIER ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section

TO:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SOUTH BEACH 1525, LLC

SOUTH BEACH 1525, LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	any as it now appears on our records. Liability Company)	<u>.</u>)
The Articles of Organization for this Limited Liability Company Florida document number 1.18000257537	were filed on 11/02/2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liah	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi		or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	8005 NOREMAC AVE	
(Principal office address MUST BE A STREET ADDRESS)	MIAMEBEACH, FL 33141	
		1741 1941 1019
Enter new mailing address, if applicable:	8005 NOREMAC AVE	AUG 29
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI BEACH, FL 33141	So lini
		-
		<u> </u>
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	· · · · · · · · · · · · · · · · · · ·
	Flo	rida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	<u>:</u>	
I hereby accept the appointment as registered agent and agr	vee to act in this canacity. I fur	ther agree to comply with t
casses, accept one approximation as registered agent and agr	ce as act in this enpacity. This	mer agree to compare with

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 adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Remove
			□ Change
			□ Remove
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	5 NOREMAC AVE, MIAMI BEACH FL 33141
	······································
fective in effect	edate, if other than the date of filing:
<u>ote:</u> If	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a t's effective date on the Department of State's records
reco	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of
The 9	Oth day after the record is filed.
. 1	8/28/2013
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uea	

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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Filing Fee: \$25.00