L18000 258372

(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nan	ne)
(Dc	ocument Number)	
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SECRETARY OF STATE
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COVER LETTER

TO: Registration Sec Division of Corp			,	
	A 20995 BISCAYNE PARTNER	RS, LLC		
SUBJECT:		Liability Company	 	
The enclosed Articles of A	Amendment and fee(s) are submitt	ted for filing.		
Please return all correspon	ndence concerning this matter to the	he following:		
	THOMAS W, FAWELL			•
		Name of Person		
	RIMON PC	ranc or reson		
		Firm/Company		
	5022 TARNBROOK DRIVE	. ,		
		Address		
	HOUSTON, TEXAS 77084			
	thomas.fawell@rimonlaw.com	City/State and Zip Code		
	E-mail address: (to be	e used for future annual	report notification)
For further information co	ncerning this matter, please call:			
THOMAS W. FAWELLL	-	312 724 at ()	4-9464	
Name of	Person	Area Code	Daytime Teleph	none 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 enc		□ \$60.00 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/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2018 DEC 10 AMII: 31

AVENTURA 20995 BISCAYNE PARTNERS, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company Florida document number	were filed on NOVEMB	ER 2, 2018 and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
AVENTURA 20955 BUSCAYNE PARTNERS, LLC				
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation	n "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:				
Florida document number 18000258372 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited is AVENTURA 20955 BUSCAYNE PARTNERS, LLC The new name must be distinguishable and contain the words "Limited I. 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 registered agent and/or the new registered office address Name of New Registered Agent: New Registered Office Address:	NOT APPLICABLE			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered of	NOT APPLICABLE Office address on our records, enter the name of the ne			
registered agent and/or the new registered office address her	<u>e</u> :			
Name of New Registered Agent: NOT APPLICA	ABLE			
New Registered Office Address:				
	Enter Florida stree	address		
·		, Florida		
	City	Zip Code		
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent and agr	ee to act in this capacit	y. 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:

AMBR = A	Name	<u>Address</u>	Type of Action
	NOT APPLICABLE		□ Add
			☐ Remove
			Change
			Add
			□ Remove
			Add
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te: If the date is	listed, the date must be nserted in this block ve date on the Dep	k does not m	neet the appl	icable statuto	ing or more than ory filing requi	90 days after filir rements, this da	ig.) Pursuant to 605 te will not be list	5.02 ted
	fies a delayed of after the recor		ate, but r	ot an effe	ctive time, a	at 12:01 a.m	ı. on the earli	er
NOVEMBE	:R 29	<u>(</u>	2018	1.		//		

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Typed or printed name of signee

Filing Fee: \$25.00