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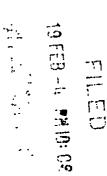
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COVER LETTER

TO:	Registration Se Division of Cor			
em m	1431 NW 2	20th, LLC		
SUBJE	CI:	Name of Limi	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		Michael Orgill		
			Name of Person	
		5270 NW 75th Ave	Firm/Company	<u> </u>
		Lauderhill, Florida 33319	Address	
		maorgill@aol.com	City/State and Zip Code	ication)
For furtl	her information co	oncerning this matter, please ca		
Michae	el Orgill		954 461-3516	
	Name o	f Person	Area Code Daytimo	: Telephone Number
Enclose	d is a check for th	ne following amount:		
\$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)

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

1431 NW 20th LL	
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on our records.) ted Liability Company)
The Articles of Organization for this Limited Liability Comp. Florida document number L19000020815	any were filed on January 18th 2019 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited I	liability company here:
INDIGO GLOBAL PROPERTIES, LLC	
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	5270 NW 75th Ave
(Principal office address MUST BE A STREET ADDRESS	Lauderhill, Florida 33313
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	d office address on our records, enter the name of the ne here:
Name of New Registered Agent: Michael Or	gill
New Registered Office Address: 5270 NW 7	75th Ave
	Enter Florida street address
Lauderhill	, Florida 33319
	City Zip Code
New Registered Agent's Signature, if changing Registered Age	ent:
provisions of all statutes relative to the proper and compl	as provided for in Chapter 605, F.S. Or, if this document is

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>	Name	Address	Type of Action
			Add
			☐ Remove
			☐ Change
<u> </u>			□ Add
			Remove
			Change
			□ Remove
			Change
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			□ Change

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. Effect	ive date, if other than the date of filing: (optional)
(If an ef	ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the tent's effective date on the Department of State's records.
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	January 31st 2019
Dated	Michael () Carl
	Signature of a member secunthorized representative of a member
	Michael Orgill

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00