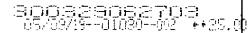
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## **COVER LETTER**

Div	ision of Cor	porations				
SURIECT:	701 MARA	ATHON SUNRISE LLC			_	
SUBJECT.		Name of Lim	ited Liability Company			
					一	
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspo	ndence concerning this matter	to the following:		,	
		Gladis Elena DIAZ			· •	
SUBJECT:  Name of Limited Liability Company  The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:  Gladis Elena DIAZ  Name of Person  GDR LLC  Firm/Company  1940 Wilson Street  Address  Hollywood, FL 33020  City/State and Zip Code ediaz@gladeses.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter. please call:  Elena DIAZ  Name of Person  Total Area Code  Name of Person  Enclosed is a check for the following amount:  S25.00 Filing Fee  \$360.00 Filing Fee,						
		GDR LLC		ame of Person  Address  Interpretation  Total description description  Total description description  Total description description  Total description description  Total description description description  Total description description description  Total description de		
	Firm/Company					
	Name of Limited Liability Company  neclosed Articles of Amendment and fee(s) are submitted for filing.  return all correspondence concerning this matter to the following:  Gladis Elena DIAZ  Name of Person  GDR LLC  Firm/Company  1940 Wilson Street  Address  Hollywood. FL 33020  City/State and Zip Code ediaz@gladescs.com  E-mail address: (to be used for future annual report notification)  rether information concerning this matter, please call:  DIAZ  Name of Person  Total Aca Code  Daytime Telephone Number  sed is a check for the following amount:  25.00 Filing Fee  Certificate of Status  Certified Copy Certificate of Status & Certified Copy Certificate Copy (Certificate Copy Certificate Copy C					
			Address			
Firm/Company  1940 Wilson Street  Address  Hollywood, FL 33020  City/State and Zip Code ediaz@gladescs.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:						
		E-mail address: (	to be used for future annual re	eport notification)	_	
For further in	nformation c	oncerning this matter, please co	all:			
Elena DIAZ				-0558		
	Name o	f Person		Daytime Telephone Nun	nber	
Enclosed is a	check for th	ne following amount:				
\$25.00 F	iling Fee		Certified Copy	Certii osed) Certii	ficate of Status & fied Copy	

MAILING ADDRESS:

TO:

Registration Section

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**

701 MARATHON SUNRISE LLC

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

he Articles of Organization for this Limited lorida document number L19000052283	Liability Compa	any were filed on	02-22-2019 and assigned
his amendment is submitted to amend the following	llowing:		
. If amending name, enter the new name	of the limited l	iability company her	<u>e</u> :
N/A			
e new name must be distinguishable and contain the	words "Limited L	iability Company," the des	signation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		N/A	
Principal office address MUST BE A STRE	ET ADDRESS	) .	
nter new mailing address, if applicable:		N/A	
Aailing address MAY BE A POST OFFICE	E BOX)		
***	<del></del>		
. If amending the registered agent and egistered agent and/or the new registered of New Registered Agent:			our records, <u>enter the name of the</u>
Name of New Registered Agent:	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
New Registered Office Address:	N/A	r ri	la street address
		enter Flora	
	N/A		, Florida Zip Code
		City	Zip Code
ew Registered Agent's Signature, if changing			

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>	<u>Address</u>	Type of Action
MGRM	DANIEL A RICART	8983 Alexandra Cir.	
			Add
		Weilington, FL 33414	
			Remove
	N/A		Change
N/A	N/A		
			Change
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	N/A
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an cfi ote:	ive date, if other than the date of filing:
rec The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier and 90th day after the record is filed.
ated	MAY 7th (2019)
	- lau Arac
	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00