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2019 SEP 30 PH 6: 36

COVER LETTER

Division of Corporations
SUBJECT: HIGHWATER REALTY LLC 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:
JOSEPH BEN MOSHE
JOSEPH BEN-MOSHE ESQ.
_ SZI FIFTH AVE 17/FI
City/State and Zip Code BMOSHE (a OD) COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)

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 Cliffon Building 2661 Executive Center Circle Tallahassee, FL 32301

JOSEPH BEN-MOSHE Counselor at Law 521 FIFTH AVENUE 17TH FLOOR NEW YORK, N Y 10175

Member New York New Jersey Bar

Tel: (212) 382-0250 Fax: (212) 819-1815

September 19, 2019

Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

Re: LLC Amendment to Articles of Incorporation - Highwater Realty LLC.

Dear Sir or Madam,

Please find the application to amend the above Articles of Incorporation for Highwater Realty LLC. Please amend the Articles of Incorporation at your earliest convenience. Please let me know if you have any questions.

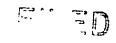
Thank you for your assistance in this matter.

Very Truly Yours,

Joseph Ben-Moshe

JBM/sk Via Regular Mail

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2019 SEP 30 PH 6: 36

HIGHWATER REAL	Codipany as it now appears on our records.) Limited Liability Company)	0 00
(<u>Name of the Limited Liability (</u> A Florida Li	Codipany as it now appears on our records.) .imited Liability Company)	
The Articles of Organization for this Limited Liability Con Florida document number $\underline{L1900071150}$	mpany were filed on3/13/19	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limiter	ed liability company here:	
The new name must be distinguishable and contain the words "Limited	ed Liability Company," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:	JOSEPH GRUN	6cRg
(Principal office address MUST BE A STREET ADDRE)	- 10 . 1	e state 1504
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register registered agent and/or the new registered office addres	ered office address on our records, <u>en</u> ess here:	ter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	···
	City . Fiorita	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 added or removed from our records:

MGR = Manager AMBR = Authorized Member Title Name Address Type of Action JOSEPH GRUNBERG F. JUS COHNLAVENUE VANDA

SUITE 1504

MIAMI BEACH F1 33/40 | Remove _____

Change 5d25 Collins Avenue DAdd MER Solomor MOYAI Suite 1504 Remove MIAMI BEACH, F/ 33140 Change _____

Remove ____ Change □ Remove _____ Change ☐ Remove

____ □ Change

fective date, if other than the date of filing:		
rective date, if other than the date of filing: 9/14/19 (optional) neffective date is fisted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 date: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed accument's effective date on the Department of State's records. record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the 90th day after the record is filed. Signature of a member of a member.		
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Signature of a member or authorized representative of a member	tod	9/22/19
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Page 3 of 3

Filing Fee: \$25.00