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To:

Division of Corporations

Fax Number

(850)617-6383

From:

Account Name

NEW URBAN DEVELOPMENT

Account Number : 120200000033

Phone

(305)696-4450

Fax Number

(305)696-4455

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address: NDESAMOURS@NUDLCC.ORG

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **GUTSNUD, LLC**

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GUTSNUD, LLC

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the United Lability Co	minimay as it now appears on our recounts.) Red Listelity Company)	
TA PROPRIE LINE	non immer's Phyllmasi	, <u></u>
The Articles of Organization for this Limited Liability Comp	any were filed on 03/20/2019	and assigned
Florida document number L19000072934		
titista que interior in the same in the sa		
This amendment is submitted to amend the following:		;
A. If amending name, enter the new pame of the limited [Hobility company here:	
TI AMERICAN STATES THE DESIRE OF THE DESIRE OF THE DESIRES	HAMILEY COMBRET BALL	
The new name must be distinguishable and contain the words "Limited L	inhility Company " the designation "I I C" as t	he approviation T. I. C.
the first term track of dissillaritations and country are and a country of		
Inter new principal offices address, if applicable:	10500 SW 149TH STREET	
Principal office address MUST BE A STREET ADDRESS	2 MIAMI, FL 33176	
later new mailing address, if applicable:	10500 SW 149TH STREET	
Mailing address MAY BE A POST OFFICE BOX	MIAMI, PL 33176	
3. If amending the registered agent and/or registered	i office address on our records, en	ter the name of the
egistered apent and/or the new registered office address	here:	
Name of New Registered Agent:	EE GIVENS	
New Basistand Office Address	149TH STREET	
New Registered Office Address:	Enser Florida proci address	
мам	, Florida	33176
	Cit):	Zip Code
then Device and America Connection if abandon Devicement has		•

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, Structure of New Recitioned Acont

Page 1 of 3

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If amending Authorized Person(s) authorized	to manage,	enter the title	, name, and	address of ea	ch person	belog added
or respond from our records:						

MGR = N	fanager Authorized Member		
Title	Name NEW URBAN DEVELOPMENT	Address 8500 NW 25TH AVENUE	Type of Action
AR ———	LC	MIAMI, FL 33147	O Add
			■ Remove
			Change
AR	GROVITES UNITED TO SURVIVE (GUTS) INC	10500 SW 149TH STREET MIAML FL 33176	■ Add
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	de	- he			
		Signature	of a member or authorized representati	ive of a member	
	HENRY LEE GIV	ENS			
	HENRY LEE GIV	'ENS	Typed or printed name of signee		

Filing Fee: \$25.00
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