

6/27/2019



Florida Department of State
Division of Corporations
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
LENNOX PROPERTY MANAGEMENT, LLC

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JUN 28 2019

19 JUN 27 PM 2:16

2019 JUN 27 A 3:30

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LENNOX PROPERTY MANAGEMENT, 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 were filed on March 26, 2019 and assigned Florida document number L19000079015

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

111 NE 1st STREET 8th FLOOR # 316 MIAMI, FL 33132

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

111 NE 1st STREET 8th FLOOR # 316 MIAMI, FL 33132

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B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City, Florida 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

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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>	<u>Type of Action</u>
MGR	ALKAHWAJI, RAFAT	111 NE 1ST STREET	<input type="checkbox"/> Add
		8TH FLOOR #316	<input type="checkbox"/> Remove
		MIAMI, FL 33132	<input checked="" type="checkbox"/> Change
MGR	KOEHL, CHRISTIAN	111 NE 1ST STREET	<input type="checkbox"/> Add
		8TH FLOOR #316	<input type="checkbox"/> Remove
		MIAMI, FL 33132	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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