

U9000157261

**Florida Department of State
Division of Corporations
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To: Division of Corporations
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From: Account Name : BARBOSA LEGAL
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: cpr@cynnergicapital.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
L.E.P. MATERIALS, LLC**

Certificate of Status	0
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2019 JUL 2 10:01 AM

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JUL 2 2019

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

L.E.P. Materials, 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 06/24/2019 and assigned Florida document number L19000157261.

This amendment is submitted to amend the following:

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

N/A

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:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(Mailing address MAY BE A POST OFFICE BOX)

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

_____, **Florida**
City *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	REAL NB, LLC	2700 N. MIAMI AVE, STE 401	<input type="checkbox"/> Add
		MIAMI, FL 33127	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	EDUARDO PELAEZ ROMER	2700 NORTH MIAMI AVE	<input checked="" type="checkbox"/> Add
		SUITE 401, MIAMI, FL 33127	<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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

