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AUG 2 9 2018 T. LEIZIEUX

COVER LETTER

TO:					
SUBJI	ECT:	16th Terra	ice LLC		
	_		Name of Lim	ited Liability Company	
The en	iclosed A	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return a	ll correspe	ondence concerning this matter	to the following:	
			Nadia Pazos		
				Name of Person	
		Name of Limited Liability Company			
	BJECT: 16th Terrace LLC Name of Limited Liability Company				
			800 Douglas Road, St	nite 830	
			_	Address	
			Miami, FL 33134		
				City/State and Zip Code	
			nadia@pazoslawgroup.c	ion	
			E-mail address; (to be used for future annual report not	ufication)
For fur	rther info	ormation e	oncerning this matter, please co	all:	
Nadia	a Pazos			n (305 -) - 330-1643	
		Name o	f Person		ne Telephone Number
Enclos	sed is a c	eheck for th	be following amount:		
			□ \$30.00 Filing Fee &	Certified Copy	Certificate of Status & Certified Copy
		Registi Divisio P.O. B	ration Section on of Corporations ox 6327	Registration Secti Division of Corpo Clifton Building	on orations

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

16th Terrace LLC

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

(Name of the Limited Liability Company as it now appears on our rec (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 07/03/2019 21 P 2 #8 and ass and assigned SECRETARY OF STATE Florida document number 200331617692. I LAHASSEE. FLORIDA This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: D'Lory Rentals, LLC 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) Enter new mailing address, if applicable: (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 City 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 = Ma AMBR = Au	nager thorized Member		
Title	Name	Address	Type of Action
		***************************************	□ Remove
			Change
			□ Remove
			□ Change
 			
			Remove
			□ Change
			□ Add
			□ Remove
			Change
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		<u> </u>	□ Change
			□ Remove
			☐ Change

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Note:	ive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier about 190th day after the record is filed.
Dated	August 13 2019
	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00