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R. WHITE MAY 18 2020

COVER LETTER

TO:

Registration Section Division of Corporations

Metropolis	\$ 1008 LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	Myriam K. Louis, Esq.				
		Name of Person			
	Lerman & Whitebook, P.A	٨.			
		Name of Person E Whitebook, P.A. Firm/Company tywood Boulevard Address add. Florida 33020 City/State and Zip Code (22@icloud.com E-mail address: (to be used for future annual report notification) s matter, please call: at (
	2611 Hollywood Boulevar	rd			
		Address	<u> </u>		
	Hollywood, Florida 33020	ı			
		City/State and Zip Code			
	maryarena22@icloud.com	_			
	E-mail address: (to be used for future annual report not	ification)		
For further information	concerning this matter, please c	all:			
Myriam K. Louis, Esq.					
Name of Person		Area Code Daytin	re Telephone Number		
Enclosed is a check for	the following amount:				
■ \$25.00 Fiting Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy		
<u>Mailing Addre</u> Registration Division of (Registration Se			
P.O. Box 6327 Tallahassee, FL 32314					
rananassee.	TT, 52514	24 LO IN, IMMORTO	oc succi, sunc 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Metropolis 1008 LLC

20207 -4 -1111:22

(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 07/10/2019	and assigned
Florida document number 1.19000178665		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity 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 agent and/or the new registered office address here:	iddress on our records, <u>enter tl</u>	ne name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flor	rida
~*************************************	City:	rida 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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Carlos M. Martinez	960 Lugo Avenue, Coral Gables, Florida 33156	□Add
			■Remove
			□Change
MGR	Seth R. Martinez	960 Lugo Avemie, Coral Gables, Florida 33156	■ Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			□Add
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If an effective date is Note: If the date i	f other than the date of fit disted, the date must be specific inserted in this block does notice date on the Department.	and cannot be prior to date of meet the applicable st	of filing or more than 90 atutory filing requirer	(optional) days after filing.) Pursuant nents, this date will not b	to 605,0207 (3 re listed as th
e record specifies : rd is filed.	a delayed effective date, but	not an effective time, at	12:01 a.m. on the ear	lier of: (b) The 90th day	y after the
Dated April 30		. 2020			
	Signature o	of a member or authorized	representative of a memb)ct	_
Carlos	D. Lerman				
		Typed or printed nam	e of signee		_

Filing Fee: \$25.00