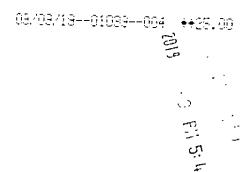
119000183792

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Amend

SEP 17 2019 I ALBRITTON

COVER LETTER

 SUBJECT:	LEE & ASS	OCIATES SOUTH FLORIDA	, LLC	
SOBJECT.		Name of Limit	ted Liability Company	
The enclosed	Articles of A	Amendment and fee(s) are subn	nitted for filing.	
Please return	all correspor	ndence concerning this matter t	o the following:	
		Richard L. Richards		
			Name of Person	
		Richards Legal Group		
			Firm/Company	
		55 Miracle Mile, Suite 310		
		-	Address	
		Coral Gables, Florida 3313	4	
			City/State and Zip Code	
		rrichards@richpa.net		
		E-mail address: (to	o be used for future annual report r	notification)
For further in	formation co	oncerning this matter, please ca	II:	
Richard L. R			305 448-2228 at ()	
	Name of	Person	Area Code Day	time Telephone Number
Enclosed is a	check for th	e following amount:		
■ \$25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations

TO:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

LEE & ASSOCIATES SOUTH FLORIDA, LLC

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

7019 Pil 5:40 _____ and assigned Florida document number _____119000183792 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 "LLC" 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 __. Florida __ 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. Thereby 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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	SOUTH INVESTMENT PROPERTY, LLC	7925 NW 12 ST., STE, 301	
		MIAMI, FL 33126	■ Remove
MGRM	MATTHEW ROTOLANTE	2394 TEQUESTA LANE	
		MIAMI, FL 33126	
		····	☐ Change
			Remove
			☐ Change
			Add
			Remove
		44	Change
			Add
			□ Remove
			☐ Change
		<u> </u>	Add
			□ Remove
			Change

ted September 6	. 2019			
record specifies a delayed The 90th day after the rec	effective date, but rord is filed.	ot an effective tir	ne, at 12:01 a.m. o	n the earlier o
cument's effective date on the De			equirements, timb diffe is	not or nated as
fective date, if other than the neffective date is listed, the date muster: If the date inserted in this bloom	be specific and cannot be pri-	or to date of filing or mor	(optional) te than 90 days after filing.) requirements, this date w	Pursuant to 605.0207 vill not be listed as
			 	
	<u></u>			
				
				
				
-				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00