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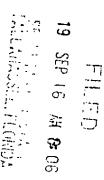
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SEP 2 6 2019

S. YOUNG

COVER LETTER

то:	Registration S Division of Co				
SUBJEC		RY LANE, LLC			
			mited Liability Company		
The encle	osed Articles of	f Amendment and fee(s) are su	bmitted for filing.		
		ondence concerning this matte	•		
		SAMUEL J. CANTOR			
		SAMUEL J. CANTOR, P	Name of Person		
Firm/Company 1001 YAMATO ROAD, SUITE 310					
		BOCA RATON, FL 3343	Address 1		
		PATTY@SAMCANPA.CO	City/State and Zip Code	·	
Confirming			to be used for future annual report notif	ication)	
ror lurtne	r information c	oncerning this matter, please c	alt:		
PATRICE	A KOHSMAN —		561 982-9555 at ()		
	Name o	f Person	Area Code Daytime	Telephone Number	
Enclosed i	s a check for th	ne following amount:			
\$25.00) Filing 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 P.O. Box 6327 Tallahassee, FL 32314

TO:

STREET/COURIER ADDRESS: Registration Section

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BAYBURRY LANE, LLC		22/19 60
(<u>Name of the Limited Liability Co</u> (A Florida Lim	mpany as it now appears on our records.) ited Liability Company)	S I
The Articles of Organization for this Limited Liability Comp Florida document number L19000197705	any were filed on08/02/2019	and assigned
This amendment is submitted to amend the following:		1000 8 00
A. If amending name, enter the new name of the limited	liability company here:	ŕ
The new name must be distinguishable and contain the words "Limited LEnter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	980 North Military Trail	
(Mailing address MAY BE A POST OFFICE BOX)	West Palm Beach, FL 33415	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address leaders of New Registered Agent: New Registered Office Address:	here: Enter Florida street address	
	, Florida	Ziv 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, 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
AMBR	IVANA DUARTE	2764 W. ATLANTIC BLVD. POMPANO BEACH, FL 33069	Add
			≅ Remove
	ROBERT CAMARGO	2764 W. ATLANTIC BLVD.	Change
AMBR	——————————————————————————————————————	POMPANO BEACH, FL 33069	
			Remove
			☐ Change
			D Add
			Remove
			□ Change
			D Add
			□ Remove
			Change
			
			Remove
			Change
			Add
			□ Remove
			Chapte

	
lfan e <u>Note</u>	tive 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 of 90th day after the record is filed.
Dorac	Sept 11 2019
Datec	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00