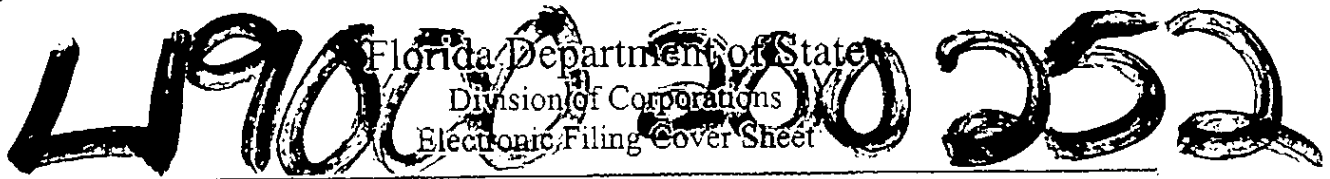


12/5/2019

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H19000352045 3)))



H190003520453ABC

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TALLAHASSEE, FLORIDA

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December 6, 2019

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

WYNWOOD JACK, LLC  
2700 N MIAMI AVE  
SUITE 601  
MIAMI, FL 33127

SUBJECT: WYNWOOD JACK, LLC  
REF: L19000200252

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The last page of the amendment was not included.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

~~If you have any questions concerning the filing of your document, please call (850) 245-6050.~~

Tracy L Lemieux  
Regulatory Specialist II

FAX Aud. #: H19000352045  
Letter Number: 419A00024768

ARTICLES OF AMENDMENT **FILED**  
TO  
ARTICLES OF ORGANIZATION  
OF 2019 DEC -6 P 13 #1

WYNWOOD JACK, LLC

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(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 08/06/2019 and assigned Florida document number L19000200252.

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

City Florida 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

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	THOMAS J. KACHIAN	8101 BISCAYNE BLVD STE 606	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33138	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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