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To:

Division of Corporations

Fax Number : (850)617-6383

From:

ACCOUNT Name : CORPORATE CREATIONS INTERNATIONAL INC

Account Number : 110432003053 Phone : (561)694-8107 : (561)694-1639 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HORSE CLUB MIAMI LLC

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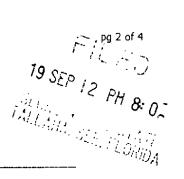
Help

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Horse Club Miami LLC			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	iability Comparionida Limited L	ny as it now appears on our record uability Company)	<u>s.</u>)
The Articles of Organization for this Limited Liabil Florida document number 1.19000211184		were filed on	and assigned
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	limited liabi	llity 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	P:	6155 SW 123 Ave	
(Principal office address MUST BE A STREET A		Miami, FL 33183	
Enter new mailing address, if applicable:		6155 SW 123 Ave	
(Mailing address MAY BE A POST OFFICE BO)	<u>X)</u>	Miami, FL 33183	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered of	Tice address on our record: g:	s, enter the name of the ne
Name of New Registered Agent:			
New Registered Office Address:	5155 SW 123 A	Ave Enter Florida street addres	The state of the s
	returnit		
<u>.</u>	Miami	City Fl	orida 33183 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.

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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
MGR	Alexander M. Marin	6155 SW 123 Ave	Add
		Miami, FL 33183	□ Remove
			■ Change
MGR	Veronica Robert	6155 SW 123 Ave	
		Miami, FL 33183	☐ Remove
			■ Change
MGR	Cristyan Serna	6155 SW 123 Ave	
		Miami, FL 33183	
			■ Change
MGR	Carolina Sintes	6155 SW 123 Ave	□ Add
		Miami, FL 33183	□ Remove
			■ Change
			Remover
			Change Change Remove
			П Веточе
			TI Change

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D. If amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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E. Effective (date, if other than the date of filing: (optional) redate is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 60	5.0207 (
Note: If the	ne date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list	ted as t
document'	s effective date on the Department of State's records.	
If the record	i specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earli th day after the record is filed.	er or:
(b) The 90	th day after the record is filed.	
Sec	ntember 11th 2019	
Dated	otember 11th 2019	
	())/	
	Signature of a member or authorized representative of a member	
	Alexander M. Marin, Manager - By: Ruchel Kauffman, Attorney-in-Fact	
	Typed or printed name of signce	