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.

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GUZMAN & GUZMAN, P.A.

Account Number : I20080000090 Phone : (305)670-1991

: (305)670-1993 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 **RAJAMIN MEIR 26 LLC**

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September 8, 2020

FLORIDA DEPARTMENT OF STATE
Division of Corporations

RAJAMIN MEIR 26 LLC 9130 S DADELAND BLVD SUITE 1509 MIAMI, FL 33156US

SUBJECT: RAJAMIN MEIR 26 LLC

REF: L19000231406

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

Please correct the misspelling of the City name on page 2nd.

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.

Yasemin Y Sulker Regulatory Specialist III FAX Aud. #: H20000308524 Letter Number: 220A00017089

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RAJAMIN MEIR 26 LLC		€∌
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our records.) Liability Company)	2020 S
The Articles of Organization for this Limited Liability Company Florida document number £19000231406	were filed on	and assigned
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here:		A D
		н5
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	255 ARAGON AVE, 2ND FLOOR	
(Principal office address MUST BE A STREET ADDRESS)	CORAL GABLES FL, 33134	
Enter new mailing address, if applicable:	255 ARAGON AVE, 2ND FLOOR	
(Mailing address MAY BE A POST OFFICE BOX)	CORAL GABLES FL, 33134	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the na	me of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida _	
	City	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.

From: Johana Giraldo

Fax: 18136585039

To:

Fax: (850) 617-6383

Page: 5 of 6

09/09/2020 2:18 PM

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>	Name	Address	Type of Action
MGR	G & G MANAGEMENT US LLC	9130 S DADELAND BLVD SUITE 1509	□Add
		MIAMI FL, 33156	= Remove
			Change
MGR	RAMON MARIANO SALEM	255 ARAGON AVE, 2ND FLOOR	🖼 Add
		CORAL GABLES FL, 33134	□ Remove
			Change
			🗆 Add
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e record spo and is filed.	ecifies a delayed eff	ective date, but	not an effective	time, at 12:01 a.	m, on the earlier o	f: (b) The 90th day	after the
Dated SEI	PTEMBER 4	 	. 2020	7://	0 1		
				Iliorized representa			

Typed or printed name of signce