Division of Corporations

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(((H19000305027 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 : (561)694-8107 Phone : (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 YAEGER PLAZA, LLC

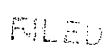
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## ARTICLES OF AMENDMENT TO \*\* ARTICLES OF ORGANIZATION OF



YAEGER PLAZA, LLC	2013 OCT 15 🖘 1: 160
(Name of the Limited Lia (A Fio	bility Company as it now appears on our records.)
The Articles of Organization for this Limited Liability Florida document number L19000245054	What is the state of
This amendment is submitted to amend the following	:
A. If amending name, enter the new name of the b	mited liability company here:
The new name must be distinguishable and contain the words "I	imited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET AD	DRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered agent and/or the new registered office at	gistered office address on our records, <u>enter the name of the new</u> ddress here:
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.

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>	Type of Action
MGR	KTB Bravis, LLC	11 ISLAND AVENUE	
		MIAMI BEACH, FL 33139	
			Remove
			E. Channe
		ALICE AND AUGMENT	Change
MGR	Yaeger Plaza Manager, LLC	11 ISLAND AVENUE	_ <b>□</b> Add
		MIAMI BEACH, FL 33139	
			☐ Remove
			☐ Change
			□ Remove
			<b></b>
			☐ Change
			□ Add
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			□ Remove
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			Add
			☐ Remove
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101e. 11	date, if other than the date of filing:  (optional)  ve date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3) the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the 's effective date on the Department of State's records.
f the recor (b) The 90	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: oth day after the record is filed.
Dated Oc	tober 14 2019
	Signature of a member or authorized representative of a member
	Joseph Panholzer, Attorney-in-Fact  Typed or printed name of signee

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Filing Fee: \$25.00