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Amend

JAN 1 6 2020 I ALBRITTON

COVER LETTER

TO: Registration Section Division of Corporations	
FATE MIAMI TNYESTMENT LLC , 3	
Name of Limited Liability Company	
Division of Corporations SUBJECT: TATE MIAMI INVESTMENT LLC , 3	
Please return all correspondence concerning this matter to the following:	
Nations Trust Mortgage Firm/Company	
Horth Miami, FL 33181	
City/State and Zip Code	
Final address: (to be used for future annual report notification)	
Fabiana VIIa a1,954, 394-6814	
Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
Certificate of Status	
• • • • • • • • • • • • • • • • • • •	

P.O. Box 6327 Tallahassee, FL 32314

• 1

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	TINVESI MENT LLC	
(<u>Name of the Limited Liabil</u> (A Florid	lity Company as it now appears on our records.) la Limited Liability Company)	
The Articles of Organization for this Limited Liability of Florida document number <u>L 19000 2.57 (</u>	Company were filed on $\frac{10/11/2019}{032}$ and	l assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin N/R	nited liability company here:	
The new name must be distinguishable and contain the words "Lir	mited Liability Company," the designation "LLC" or the abbreviation	n "L.L.C,"
Enter new principal offices address, if applicable:	NIR	
(Principal office address MUST BE A STREET ADD	RESS)	
	ed office address on our records, enter the name of the	
agent and/or the new registered office address here:	D. C.	0
Name of New Registered Agent:	N/8	
New Registered Office Address:	Enter Florida street address	
	. Florida	
	City Zip C	'ode

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>	Address	Type of Action
MBR	Cristian Daniel Imhof	f 2250 HE 123 St	_ t Add
		North Miami, FL 33181	_ □Remove
			_ 🗆 Change
			_ □Add
			_ □Remove
			_ □Change
			_ □Add
			_ □Remove
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ote:	ive date, if other than the date of filing:
recor	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
t is fi	ied.
ated	9th December 2019
	1 Cally
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00