L20000004425

| (Requestor's Name) | |
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| PICK-UP WAIT MAIL | |
| | |
| (Business Entity Name) | - |
| (,,,, | |
| | |
| (Document Number) | |
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| Certified Copies Certificates of Status | |
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| Special Instructions to Filing Officer: | |
| Special instructions to 1 ming officer. | |
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Office Use Only



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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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|--------------------------|--------------|--------|----------|--------------------------------|
| 1333 3RD Avenue Ui | nit 304 LLC | | | |
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| | | | | |
| | | | <u> </u> | Art of Inc. File |
| | | | | LTD Partnership File |
| | | | | Foreign Corp. File |
| | | | | L.C. File |
| | | | | Fictitious Name File |
| | | | | Trade/Service Mark |
| | | | | Merger File |
| | | | | Art, of Amend, File |
| | | | | RA Resignation |
| | | | | Dissolution / Withdrawal |
| | | | | Annual Report / Reinstatement |
| | | | | Cert. Copy |
| | | | | Photo Copy |
| | | | <u> </u> | Certificate of Good Standing |
| | | | | Certificate of Status |
| | | | l | Certificate of Fictitious Name |
| | | | | Corp Record Search |
| | | | <u> </u> | Officer Search |
| | | | | Fictitious Search |
| Signature | | | | Fictitious Owner Search |
| 3 | | | | Vehicle Search |
| | | | | Driving Record |
| Requested by: SETH | 05/28/20 | | | UCC 1 or 3 File |
| Name | Date | Time | | UCC 11 Search |
| | Duit | 111100 | | UCC 11 Retrieval |
| Walk-In Thom some GA BOD | Will Pick Up | | | Courier |

COVER LETTER

| Division of C | orporations | | |
|--------------------------|--|--|--|
| 1333 3RJ SUBJECT: | D AVENUE UNIT 304 LLC | | |
| JOBSECT, | Name of Lin | nited Liability Company | |
| The enclosed Articles | of Amendment and fee(s) are sub | omitted for filing. | |
| Please return all corres | pondence concerning this matter | to the following: | |
| | David Bauer | | |
| | | Name of Person | |
| | Bauer Gutierrez & Borbor | n PLLC | |
| | | Firm/Company | |
| | 814 Ponce de Leon Blvd, | Suite 210 | |
| | | Address | |
| | Coral Gables, FL 33134 | | |
| | | City/State and Zip Code | - |
| | angel@312holdings.com | | |
| | E-mail address: (| to be used for future annual repo | rt notification) |
| For further information | concerning this matter, please c | all: | |
| David Bauer | | 305 340-59 | 159 |
| Name | of Person | | Paytime Telephone Number |
| Enclosed is a check for | the following amount: | | |
| ■ \$25.00 Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed | Certificate of Status & Certified Copy (additional copy is enclosed) |
| MAI | LING ADDRESS: | STREET/CO | OURIER ADDRESS: |

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Registration Section

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

202016.123 7117:49

1333 3RD AVENUE UNIT 304 LLC

(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 Compan | y were filed on 01/07/20 | 20 and assigned |
|--|--|--|
| Florida document number L20000004425 | | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited lia | bility company here: | |
| 1117 AF INVESTMENTS LLC | | |
| The new name must be distinguishable and contain the words "Limited Liab | oility Company," the designa | ion "LLC" or the abbreviation "L.L.C." |
| 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 of registered agent and/or the new registered office address here. Name of New Registered Agent: | office address on our re: | |
| New Registered Office Address: | | |
| | Enter Florida stre | et address |
| | | , Florida Zip Code |
| New Periode de America Circulation (C.) | City | Zip Code |
| New Registered Agent's Signature, if changing Registered Agent | _ | |
| I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change. | e performance of my di provided for in Chapte | uties, and I am familiar with and er 605, F.S. Or, if this document is |
| If Cha | anging Registered Agent, <u>Si</u> | gnature 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

2020 K... 1 28 7.1 7:49

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|---------------------|-----------------------------------|----------------|
| MGR | Angel Fernandez Jr. | 814 Ponce de Leon Blvd, Suite 210 | |
| | | Coral Gables, FL 33134 | ■ Remove |
| | | | ☐ Change |
| AMBR | 312 STRENGTH CORP | 814 Ponce de Leon Blvd, Suite 219 | = Add |
| | | Coral Gables, FL 33134 | ☐ Remove |
| | | | Change |
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| ffective date, if other than t an effective date is listed, the date in lote: If the date inserted in this ocument's effective date on the | must be specific and cannot block does not meet to | he applicable statuto | ing or more than 90 | option (option) days after f | iling \ Pursuant to | 505.0207 (isted as t |
| | and a BB coult do to | | | 12.01 - | m on the ear | rlier of: |
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| The 90th day after the r | ecord is filed. | er or authorized repres | | | | · |

Page 3 of 3

Filing Fee: \$25.00