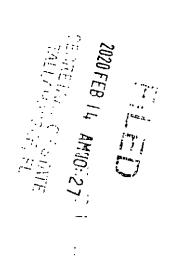
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(Requesto	or's Name)	
(Address)		
(Address)		
(City/State	e/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Business	Entity Name)	
(Documer	nt Number)	
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Office Use Only



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O SIMMONS FEB 17 2020 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 181792 _ 1091

AUTHORIZATION : Openie to the contraction of the co

COST LIMIT : \$ 25.00

ORDER DATE: February 14, 2020

ORDER TIME : 2:45 PM

ORDER NO. : 181792-005

CUSTOMER NO: 10910A

DOMESTIC AMENDMENT FILING

NAME: JOEGEM REGENCY LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT# 62980

EXAMINER'S INITIALS:

COVER LETTER

TO:	Registration Sec Division of Corp				
SUBJE	ecr:	JOEGEM REGI	ENCY LLC		
01/2002	····		mited Liability Company		
The end	closed Articles of A	Amendment and fee(s) are su	bmitted for filing.		
Please r	eturn all correspor	idence concerning this matte	er to the following:		
		STEPHE	EN S. SIMINOU, ESQ		··-
			Name of Person		
		SIMINO	U & ASSOCIATES, P	C	
			Firm/Company		
		1776 BRG	DADWAY, SUITE 80	0	
			Address		
		NEW YO	ORK, NEW YORK 10	019	
		•	City/State and Zip Code		
			NOU@SIMINOULAV		
For fund	her information co	n-mail address:	(to be used for future annual call:	report notification)	
	STEPHEN S.	. SIMINOU	at ()	683-8400	
	Name of	Person	Aren Code	Daytime Telepho	one Number
Enclose	d is a check for the	: following amount:			
IX \$25	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is encl		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Se	•	<u>Street Ad</u> Registra	ldress: ition Section	
	Division of Co	rporations	Divisior	of Corporation	
	P.O. Box 6327			tre of Tallahas	
	Tallahassee, Fl	232514	2415 N.	Monroe Street	i, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	REGENCY LLC	_
(Name of the Limited Liability Com (A Florida Limite	ipany as it now appears on our records.) id Liability Company)	
		assigned
(Name of the Limited Liability Company appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed onJANUARY 14, 2020 and assigned Florida document number		
A. If amending name, enter the new name of the limited lia	ability company here:	2020 FE
The new name must be distinguishable and contain the words "Limited Lin	ability Company." the designation "LLC" or the abbreviation	"EDD.C."
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	e address on our records, enter the name of the	new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	
	Clip Zip Co	de

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
MGR	STEVEN OVED	920 COLLINS AVENUE	\S\Add
		MIAMI BEACH, FLORIDA 33139	[]Remove
			Change
			TALL DREMOVE
- .			Change Remove
			Change
			□Add
		□Remove	
			Change
		🗆 Add	
		□Remove	
			□ Change
-			□Add
			🗆 Remove
			□Change

If amending any other information, enter change(s) here: (Attach additional sheet		
	2020 REC:	
	FEB 14	·
	AH 0:	
	0: 27 SIANE FIL	ę, _{Ser}
	312	
Effective date, if other than the date of filing: [If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 Note: If the date inserted in this block does not meet the applicable statutory filing requirem document's effective date on the Department of State's records.	(optional) days after filing.) Pursuant to 605.0 ments, this date will not be listed	207 (3) I as the
he record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear ord is filed.	lier of: (b) The 90th day after t	the
Dated February 13 , 2020		
Structure of a member or authorized representative of a memb	per	

Filing Fee: \$25.00