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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEOPOLD KORN & LEOPOLD, P.A.

Account Number : 120010000025 Phone : (786)899-2235

: (305)935-9042 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: kleopold@leopoldkorn.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 1940 BIARRITZ LLC

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Feb. 18. 2020 3:39PM

No. 0081 P. 2

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	BIARRITZ LLC	
(Name of the Limited Liabilit (A Florida	ty Company as it now appears on our record Limited Liability Company)	15.)
The Articles of Organization for this Limited Liability C	ompany were filed on <u>February 5</u>	2020 and assigned
Florida document number L20000042978	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ited liability company here:	2020 FE SLICATE
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC	· · · · · · · · · · · · · · · · · · ·
Enter new principal offices address, if applicable:		8
(Principal office address MUST BE A STREET ADDR	(ESS)	
		20
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 address here:	d office address on our records, <u>enter</u>	the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	0.00.00	
	Enter Florida street addre.	<i>\$\$</i>
	, FI	lorida Zip Code
	On y	in com

## 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.

Feb. 18, 2020 3:39PM
If amenoing Authorized rerson(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_	BARR & PEROT LLC	2875 NE 191ST STREET, SUITE 500	□Add
		AVENTURA, FL 33180	⊠Remove
			□Change
MGR	AJIM INC.	2875 NE 191ST STREET, SUITE 500	□Add
		AVENTURA, FL 33180	⊠Remove
			Change
MGR	INVINUS CORP.	2875 NE 191ST STREET, SUITE 500	□Add
		AVENTURA, FL 33180	⊠Remove
			□ Change
MGR	JOE GERSHON	2875 NE 191ST STREET, SUITE 500	<b>\</b> Add
		AVENTURA, FL 33180	
			- Change
		00 c m - 57 to	AH dad C
		——————————————————————————————————————	□Remove
			□Change
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ffective date, an effective date ote: If the date ocument's effec	inserted in th	us block does	not meet t	he applica	o date of fili ble statutor	ng or more th ry filing req	opt an 90 days afte tirements, th	ional) er filing.) P is date wi	ursuant to 605 ll not be liste	.020 ed a
record specifies is filed	: a delayed effe	ective date, bu	It not an ef	ffective tir	ne, at 12:0)	l a.m. on the	e earlier of: (	b) Thes	Oth day after	r the
ated <u>Febru</u>	ary 17		, _2	020						
		Signature	of a memb	er or autho	rized repres	ritative of a r	nember			