L20000064316

(Red	questor's Name)	
(Add	dress)	
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PICK-UP	☐ WAIT	MAIL
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(Bu	siness Entity Name))
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Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	

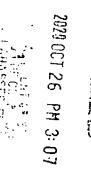




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COVER LETTER

то:	Registration Se Division of Cor			
CUDIC		H OCEAN DRIVE, LLC		
SUBJEC	.1:	Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fec(s) are sub	mitted for filing.	
Please re	turn all correspo	ndence concerning this matter	to the following:	
		JAMIE ALAN SASSON		
			Name of Person	<u></u>
		THE TICKTIN LAW GRO	OUP	
		-	Firm/Company	
		270 SW NATURA AVEN	UE	
			Address	
		DEERFIELD BEACH, FI	ORIDA 33441	
			City/State and Zip Code	
		SERV513@LEGALBRAIN		***
			to be used for future annual report not	afication)
For furth	er information c	oncerning this matter, please c	all:	
JAMIE.	ALAN SASSON		561 715-1525	
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed	l is a check for th	ne following amount:		
■ \$25.	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres Registration S Division of C	Section	Street Address: Registration Se Division of Co	
	P.O. Box 632 Tallahassee, I		The Centre of 2415 N. Monro	Tallahassee oc Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

120 SOUTH OCEAN DRIVE, 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 Company were filed on $\frac{02/26/2020}{1}$ Florida document number L20000064316 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: REAL ESTATE DEVELOPMENT INNOVATIONS, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida

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.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MBR	IDAMIA, LLC	1730 S. FEDERAL HWY, SUITE 309	= Add
		DELRAY BEACH, FL 33483	□Remove
			□Change
MBR	RADOSVETA RIZZO	50 EAST ROAD, # 9F	🗏 Add
		DELRAY BEACH, FL 33483	Remove
			□Change
-			□Add
			□Remove
			Change
			□Add
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f an effectiv Note: If t	date, if other thar re date is listed, the dat ne date inserted in the s effective date on t	te must be specific his block does no	and cannot be pri of meet the app	licable statutory	or more than 90 day filing requirement	s after filing.) Pursuar	nt to 605.0207 (be listed as t
ne recor The 90	d specifies a del th day after the	ayed effectiy record is file	e date, but/	not an effectiv	ve time, at 12:	01 a.m. on the	earlier of:
OC Dated	TOBER 19TH			 `			
			/ 1/	1			
	///	Signature o	of a member or au	thorized represent	ative of a member	·	

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