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COVER LETTER

ТО:	Registration Sec Division of Corp			•		
SI:DIF4		ICAL LLC				
SUBJEC	: <u></u> _	Name of Limit	ted Liability Company			
The encl	losed Articles of a	Amendment and fee(s) are subm	nitted for filing.			
Please re	etum all correspo	ndence concerning this matter t	to the following:			
		ABRAHAM ZIADEH				
			Name of Person			
		ABRAHAM ZIADEH CPA	A PA			
		CORSICAL LLC Name of Limited Liability Company es of Amendment and fee(s) are submitted for filing. respondence concerning this matter to the following: ABRAHAM ZIADEH Name of Person ABRAHAM ZIADEH CPA PA Firm/Company 9000 SHERIDAN STREET #158 Address PEMBROKE PINES, FL 33024 City/State and Zip Code abraham@ziadehepa.com E-mail address: (to be used for future annual report notification) tion concerning this matter, please call: EH 954 651-1410 at (Area Code Daytine Telephone Number				
		9000 SHERIDAN STREET	Г#158			
			Address	<u> </u>		
		PEMBROKE PINES, FL 3	3024			
			City/State and Zip Code			
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For furtl	her information c	oncerning this matter, please ca	ill:		20	4.
ABRAI	IAM ZIADEH					. ; :
-	Name o	f Person		Telephone Number	9	- ئ ئارى
						1,30
Enclose	d is a check for th	ne following amount:			<i>i</i> ;	35 25
□ \$25	.00 Filing Fee		Certified Copy	Certificate of Statu Certified Copy	ıs &	TIES S

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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

20 May 10 Pri 2: 5

1801 CORSICAL 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 02/28/2020	and assigned
Florida document number L20000066312		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
1801 CORSICA LLC		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "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)	<u>-</u> .	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the</u>	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	. Floric	ła
	City	Zip Code
Now Designated Assert's Claustons of sharping Designated Assets		

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 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
			□Add
			Remove
			🗆 Add
			□Remove
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(If an effi Note:	ve date, if other than the date of filing: O2/28/2020 (optional) (optional) (optional) If the date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3x after the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
the record ford is fil	I 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 ed.
Dated	03/10/2020
	1-1
	Signature of a member or authorized representative of a member
	ABRAHAM ZIADEH
	Typed or printed name of signee

D.

Filing Fee: \$25.00