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Office Use Only



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COVER LETTER

Div	ision of Cor	porations					
SUBJECT:	RITZ 1404	LLC					
Sobole 1.		Name of Lim	ited Li	ability Company			
The enclosed	Articles of	Amendment and fee(s) are sub	mitted	for filing.			
Please return	all correspo	ndence concerning this matter	to the	following:			
		M. KEITH MARSHALL					
				Name of Person			
		M. KEITH MARSHALL,	P.A.				
		Firm/Company					
	26 MURANO DRIVE						
		-		Address			
		WEST WINDSOR, NJ 085	550				
		•	City	/State and Zip Code			
		kmarshall1231@gmail.com		sed for future annual r			
r e a	.			sed for future annual r	ероп воинса	10N)	
ror iurther ii	Hormation co	oncerning this matter, please co	a11:				
KEITH MAI	RSHALL			305 785 _ at ()	-5553		
	Name of	Person		Area Code	Daytime Te	lepho	one Number
Enclosed is a	check for th	e following amount:					
■ \$25.00 F	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:

TO:

Registration Section

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

(Name of the Limi	ited Liability Compa (A Florida Limited	any as it now appears on ou Liability Company)	r records.)
The Articles of Organization for this Limited L Florida document number 1.20000070282	Liability Company	were filed on MARCH	3, 2020 and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liab	oility company here:	
N.A.			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designat	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	N.A	
(Principal office address MUST BE A STREI	ET ADDRESS)		
			··. · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:		N.A.	
Mailing address MAY BE A POST OFFICE	(BOX)		<u> </u>
			·.
B. If amending the registered agent and/or agent and/or the new registered office addre		address on our records	s, enter the name of the new regist
Name of New Registered Agent:	N.A.		
New Registered Office Address:	N.A.		
		Enter Florida stre	et address
			, Florida
		City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

RITZ 1404, LLC

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	DAVID GLAS	21140 NE 20th Ave., N. Miami Beach, FL 33179	= Add
			□Remove
			🗆 Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change

Froi	m and after the date of filing this Amendment to Articles of Organization, the Manager named herein,
or h	is successor, if one shall be so appointed, shall have such authority and powers as set forth in the
Stat	ement of Authority recorded among the Public Records of Miami-Dade County, Florida.
 	
fan effectiv Note: If t	date, if other than the date of filing:
record sp d is filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Auj	gust 10 . 2020
	1/_/ /- -/

Typed or printed name of signee