## L2000179045

| (Re                     | equestor's Name)   |             |
|-------------------------|--------------------|-------------|
| (Ac                     | ddress)            |             |
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| (Cı                     | ty/State/Zip/Phone | e #)        |
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| (Bu                     | isiness Entity Nar | ne)         |
| (De                     | ocument Number)    |             |
| Certified Copies        | Certificates       | s of Status |
| Special Instructions to | Filing Officer     |             |
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## P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 1

10/5/20

NAME:

EDG REAL ESTATE DEVELOPMENTS LLC

TYPE OF FILING: AMENDMENT

COST: 25.00

**RETURN: PLAIN COPY PLEASE** 

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

2020 OCT -5 PM 1:23

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Coame of the Dam   | (A Florida Limited   | Liabilily Company)    | III of Aft LITBERS           |                     |
|--|----------------------|-----------------------|------------------------------|---------------------|
| The Articles of Organization for this Limited 9 Florida document number 120000179045   | Liability Company    | were filed on         | une 30, 2020                 | and assigned        |
| This amendment is submitted to amend the fol   | lowing:              |                       |                              |                     |
| A. If amending name, enter the new name  | of the limited link  | ility company h       | ere:                         |                     |
| The new name must be distinguishable and contain the                                   | words "Limited Liabi | lity Company," the    | designation "LLC" or the abb | eviation "L.L.C."   |
| Enter new principal offices address, if appli  | cable:               | 13499 BISCAY          | NE BLVD; STE T3              |                     |
| (Principal office address MUST BE A STREET ADDRESS)                                    |                      | NORTH MIAMI, FL 33181 |                              |                     |
| Enter new mailing address, if applicable:  |                      | 13499 BISCAY          | 'NE BLVD; STE T3             |                     |
| Mailing address MAY BE A POST OFFICE BOX   |                      | NORTH MIAM            | (I, FL 33181                 |                     |
| B. If amending the registered agent and/or agent and/or the new registered office addr |                      | address on our r      | ecords, enter the name       | of the new register |
| Name of New Registered Agent:  | ANDREA AN            | DRADA                 |                              |                     |
| New Registered Office Address:   | 13499 BISCAY         | NE BLVD; STE          | Т3                           |                     |
| 112111111111111111111111111111111111111  | <del> </del>         | Enter Flo             | rida street address          | <del></del>         |
|  | NORTH MIAN           | <del></del>           | , Florida 3318               |                     |
|  |                      | City                  |                              | Zip Code            |

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

EDG REAL ESTATE DEVELOPMENTS 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 Highattere 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> [itle</u> | <u>Name</u> | Address      | Type of Action |
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| ctive date, if other ti                                    | un the date of filin    | October 2, 20                            |   | (option  | <b>a</b> l)   |
| effective date is listed, the<br>e: If the date inserted i | n this block does not r | s caunot be prior to<br>meet the applica | o date of filing or mon<br>ble statutory filing ( | than 90 days after fil<br>requirements, this d | ing.) Pursuant to 605.020<br>ate will not be listed a |
| ment's effective date of                                   |                         |  |   |  |   |
|  |                         |  | /   |  |   |
| ord specifies a delayed                                    | effective date, but no: | an effective tim                         | ic, at 12:01 a.m. on                              | the earlier of: (b)                            | The 90th day after the                                |
| filed.   | )                       |  |   |  | •   |
|  | }                       |  |   |  |   |
| d OCTOBER 2  |                         | 2020<br>·                                | _/  |  |   |
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|  | 7//                     |  | zed representative of                             |  |   |

Filing Fee: \$25.00