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2020 SEP 24 PM 2: 58

JQ 10/30/20

COVER LETTER

10: Registration Se Division of Cor			
3311 South	1.1.C		
SC Dalx.1.	Name of Lim	ited Liability 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:	
	Chase Caindee		
		Name of Person	
		Firm Company	
	3225 McLeod Drive, Suite	+ 100	
		Address	
	Las Vegas, Nevada 89121		
		City State and Zip Code	
	ra@andersonadvisors.com F-mail address: (to be used for future annual report notif	ication)
For further information co	oncerning this matter, please c	all:	
Chase Caindee		800 706-4741	
Name o.	l'Person	Area Code Daytime	· Lelephone Number
Enclosed 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 tadditional copy is enclosed)	□ \$60,00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

MAHING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2001 Executive Center Circle Tallahassee, F1, 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

3311 South LLC		
(<u>Name of the Limited Liability Cor</u> (A Florida Limit	mpany as it now appears on our records ted I tability Company)	<u>v.</u>)
The Articles of Organization for this Limited Liability Comparida document number 1.20000268025		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	iability company here:	
The new name must be distinguishable and contain the words "Limited I.	iability Company," the designation "LLC"	" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS	<u> </u>	
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX)</u> B. If amending the registered agent and/or registered egistered agent and/or the new registered office address by		2020 SEP 24 PM 2: 5 the of the enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	v
	Flo	orida
	Cir	Zip Code

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 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>	<u>Address</u>	Type of Action
AMBR	Short Hill Holdings, LLC	8 SHORT HILL RD.	= Add
		NEW CITY, NY 10956	☐ Remove
			Change
AMBR	JMaldo Investment Holdings, LTC	3700 GALT OCEAN DRIVE	∃ Add
		APT. 1204	□ Remove
		FORT LAUDERDALE, FL 33308	☐ Change
			□ Remove
			□ Change
			□ Add
			☐ Remove
			☐ Change
			2020 SEP 24Vc
			Add SEP 25 PH 25 58
			
			☐ Remove
			□ Change

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te: If the date inserted in this block cument's effective date on the Depar record specifies a delayed efthe 90th day after the record	does not meet the a timent of State's red fective date, bu is filed.	ipplicable statuto cords. ut not an effec	ry tiling requiren	ents, this date	
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