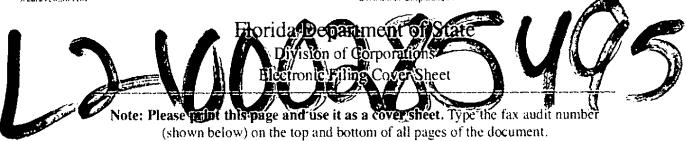
9/22/21, 8:30 AM

Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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Ema	11	Address:	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RELATED URBAN CONSTRUCTION LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

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Help



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RELATED URBAN CONSTRUCTION LLC				
(<u>Name of the Limited Liability Compa</u> (A Flonda Limited	iny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company lorida document number $\frac{L^{24000285495}}{L^{24000285495}}$.	were filed on	and assigned		
his amendment is submitted to amend the following:				
a. If amending name, enter the new name of the limited liab	ility company here:			
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."		
Inter new principal offices address, if applicable:	2850 Tigertail Avenue, 7th Floor			
Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33133			
Enter new mailing address, if applicable:	2850 Tigertail Avenue, 7th Floor			
Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 33133			
 If amending the registered agent and/or registered office agent and/or the new registered office address here: 	address on our records, <u>enter the n</u>	ame of the new regist		
Name of Name Designation of Assert		SEP TI		
Name of New Registered Agent:		72 1::		
New Registered Office Address:	Enter Florida street address			
	, Florida	2: L		
erant continue the continue of	City	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 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>	Name	Address	Type of Action
PRESIDENT	PEREZ, JON PAUL	2850 Tigertail Avenue, 7th Floor	[]Add
		Miami, FL 33133	□Remove
			■ Change
VP	ALLEN, MATTHEW	2850 Tigertail Avenue, 7th Floor	🗀 Add
		Miami, FL 33133	□Remove
			■ Change
VP. SECRETARY, TREASURER	HOYOS, JEFFERY	2850 Tigertail Avenue, 7th Floor	
		Miami, FL 33133	□Remove
			■ Change
			□ Remove
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			□Change

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	ate of filing:		(optional)	
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ffective date, if other than the data an effective date is listed, the date must be	e specific and cannot be prior	.bla statutami filino ea	anicomante this data wi	ll not be listed :
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