L22000131550

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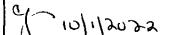




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2022 July -5 KH 9: 03



COVER LETTER

Division of Cor	porations		•
1800 NOR	TH MIAMEHOLDINGS LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Annette Lopez, Esq.		
		Name of Person	
	Law Offices of Annette Lo	opez, P.A.	
		Firm/Company	
	100 Almeria Avenue, Suit	e 204	
		Address	
	Coral Gables, FL 33134		
		City/State and Zip Code	
	annette@annettelopezlaw.c	om to be used for future annual report notifie	ration)
For further information of	oncerning this matter, please c		
Annette Lopez, Esq.		305 517-3151	
Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for the	he following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addres</u> Registration		Street Address: Registration Sect	ion
Division of C		Division of Corpo	

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

TO:

Registration Section

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

2022 JUL -5 7M 9: 03

1800 NORTH	I MIAMI HOLDINGS LLC	9 1 9: (
(Name of the Limited Liability C (A Florida Li	Company as it now appears on our recordinated Liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liability Com	npany were filed on	and assigned
Florida document number L22000131550		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designation "LL.	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u></u>	
5		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		
B. If amending the registered agent and/or registered o agent and/or the new registered office address here:	office address on our records, <u>enter</u>	r the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre	38
	F.	lorida
New Registered Agent's Signature, if changing Registered A		Zip Code
I hereby accept the appointment as registered agent an		
provisions of all statutes relative to the proper and com accept the obligations of my position as registered ager	aplete performance of my duties, a	md I am familiar with and

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
MGRN	Sunnyvalle Ventures LLC	1800 N. Miami Avenue	□Add
		Miami, FL 33136	=0
			□Change
MGR	Sunnyvale Ventures LLC	1800 N. Miami Avenue	□Add
		Miami, FL 33136	□Remove
			☐Change
	·		
			□Remove
			□Change
			☐Remove
			□Add
			□Remove
			Change
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			□Remove
			∏ Change

amending any other infor					
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Fective date, if other than n effective date is listed, the date ote: If the date inserted in thi cument's effective date on th	must be specific and cannot b s block does not meet the	applicable statutory	g or more than 90 o	(optional) lays after filing.) Puents, this date wil	rsuant to 605.020 I not be listed a
ecord specifies a delayed effe is filed.	ctive date, but not an effec	tive time, at 12:01	a.m. on the earli	er of: (b) The 90	Oth day after the
June 30	2022				
			<u>.</u> .		
	Signature of a member of	or authorized represer	ntative of a membe	<u> </u>	<u> </u>
	·				
		ona, Manager of Surprinted name of sig	-	es LLC	

Filing Fee: \$25.00