19900000 1882

(Red	questor's Name)	
(Add	dress)	
(Ade	dress)	
(City	y/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

	nue Holdings, LLC		
yongeer.		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Amy Goldin		
		Name of Person	
	Amy H. Goldin, P.A.		
		Firm/Company	
	1801 SE 3rd Avenue. #200		
		Address	
	Ft. Lauderdale, FL 33316		
	dockshrock@gmail.com	City/State and Zip Code	
•	E-mail address: (t	to be used for future annual report notif	cation)
For further information	concerning this matter, please ca	all:	
Amy Goldin		954 9156949 at ()	
Name	of Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for	the 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)

MAILING ADDRESS:

Registration Section

Division of Corporations

TO:

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

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Third Avenue Holdings, LLC		
(Name of the Lim	ited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Florida document number 199000001882	Liability Company were filed on March 30, 1999	and assigned
This amendment is submitted to amend the fo	Howing:	
A. If amending name, enter the new name	of the limited liability company here:	
he new name must be distinguishable and contain the	words "Limited Liability Company," the designation "LLC" (or the abbreviation "L.L.C."
Enter new principal offices address, if appl	icable:	770 19
Principal office address MUST BE A STRE	ET ADDRESS)	<u> </u>
		2 - O
inter new mailing address, if applicable:		- 10 多 U
Mailing address MAY BE A POST OFFICE	<u> </u>	
B. If amending the registered agent and egistered agent and/or the new registered		enter the name of the
Name of New Registered Agent:	Kevin B. Shrock	
New Registered Office Address:		
	Enter Florida street address	
	, Flor	rida Zip Code
	Cny	ли Соас

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, E.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
MGR	Kevin Shrock, M.D.	1414 SE 3rd Avenue Ft. Lauderdale, FL 33316	Add
-			Change
MGR	Shrock Family Realty, Ltd.	Ft. Lauderdale, FL 33316	Add
			Remove
			Change
			□ Remove
			Change
			Remove
			Change
			☐ Remove
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i effe <u>te:</u>	effective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date of filing or mo Effective date inserted in this block does not meet the applicable statutory filing ment's effective date on the Department of State's records.	(optional) re than 90 days after filing.) Pursuant to 605.020 requirements, this date will not be listed as
he	ecord specifies a delayed effective date, but not an effective time 90th day after the record is filed.	me, at $12:01$ a.m. on the earlier o
.ed _	de la	23/May (2019

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00