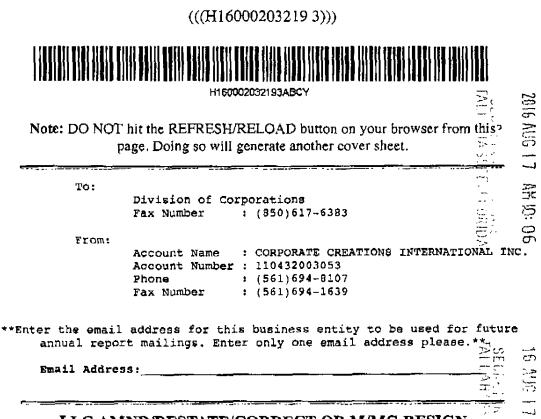
5612968430

Division of Corporations

https://cfile.sunbiz.org/scripts/efilcovr.exe

Floridade partement of State 275 Division of Corporations Division of Corporations Division of Corporations Sheet Sh

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.



LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CONTEMPORARY SINGLE FAMILY LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

NO LAPKENE

Electronic Filing Menu

Corporate Filing Menu

Help

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of
State: Contemporary Single Family LLC
Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
Enter new mailing address, if applicable: (Mailing pddress MAY BE A POST OFFICE BOX)
2. The Florida document number of this limited liability company is: M1600005275
3 Turi-diation of its assentiation. Delaware
4. Date authorized to do business in Florida: 06/30/2016
SECTION II (5-9 complete only the applicable changes)
5. New name of the Ilmited liability company: (must contain "Limited Liability Company, " "L.L.C.," or "LLC."))
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Plorida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "LL.C." or "LLC.")
6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here;
Name of New Registered Agent:
New Registered Office Address: Enter Florida Street Address
City , Florida Zip Code
New Registered Apent'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.

itic/Capacity	Name	Address	Type of Action
MGR	Jordan Kavana	18305 BISCAYNE BLVD, SUITE	102 □Add
		AVENTURA, FL 3316	60 Remov
MGR	Jacques Bessoudo	18305 BISCAYNE BLVD, SUITE 402	
		AVENTURA, FL 3316	60 Remov
MGR	Contemporary Investments Management, LLC	18305 BISCAYNE BLVD, SUITE 402	
		AVENTURA, FL 33160	
			Add
·····			Remove
			Add