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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**  
**CRESAM 2020 LLC**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
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01/15/2020 1:11 PM

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**FILED**

2019 NOV 15 P 7:50

CRESAM 2020 LLC

~~(Name of the Limited Liability Company as it now appears on our records)~~  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 08/22/2019 and assigned  
Florida document number P19000067611

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The 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 applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**B. If amending the registered agent and/or registered office 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 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>                                | <u>Type of Action</u>                      |
|--------------|-----------------|---|--|
| PD           | LIMONTA, DELLYS | 14750 SW 26 STREET STE 116<br>MIAMI, FL 33185 | <input type="checkbox"/> Add               |
|              |                 |   | <input checked="" type="checkbox"/> Remove |
|              |                 |   | <input type="checkbox"/> Change            |
| MGR          | LIMONTA, DELLYS | 14750 SW 26 STREET STE 116<br>MIAMI, FL 33185 | <input checked="" type="checkbox"/> Add    |
|              |                 |   | <input type="checkbox"/> Remove            |
|              |                 |   | <input type="checkbox"/> Change            |
|              |                 |   | <input type="checkbox"/> Add               |
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|              |                 |   | <input type="checkbox"/> Add               |
|              |                 |   | <input type="checkbox"/> Remove            |
|              |                 |   | <input type="checkbox"/> Change            |

**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

E. Effective date, if other than the date of filing: 10/10/2019 (optional)  
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02G7 (3)(b)  
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

Dated OCTOBER 10 2019

Signature of a member or authorized representative of a member

LIMONTA, DELLYS

Typed or printed name of signee