L13000003713

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COVER LETTER

TO: Registrati Division o	on Section Corporations
GERN SUBJECT:	AS LLC
SUBJECT:	Name of Limited Liability Company
The enclosed Articl	es of Amendment and fee(s) are submitted for filing.
Please return all con	respondence concerning this matter to the following:
	Sandra B. Masso
	Name of Person
	PEAK CORP
	Firm/Company
	16475 Golf Club Rd. Suite # 304
	Address
	Weston, Fl. 33326
	City/State and Zip Code
	peakcorp@hotmail.com
	E-mail address: (to be used for future annual report notification)
For further informa	on concerning this matter, please call:
Sandra B. Masso	305 282-8251 at (
N	me of Person Area Code Daytime Telephone Number
Enclosed is a check	for the following amount:
■ \$25.00 Filing F	Certificate of Status Certified Copy (additional copy is enclosed) S50.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
<u>Mailing A</u> Registrat	dress: on Section Street Address: Registration Section
Division	of Corporations Division of Corporations
P.O. Box	
l allahass	ee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GERMAS CLC		•	
(Name of the Limited L (A F	iability Compa Iorida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liabil Florida document number L13000003713	ity Company	Liability Company) were filed on 01/08/2013 and assigned	
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	: li <u>mi</u> ted liab	pility company here:	
he new name must be distinguishable and contain the words	"Limited Liabi	ility Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable	:	1555 N. Treasure Drive. Suite # 212	
Principal office address MUST BE A STREET ADDRESS)		North Bay Village Fl. 33141	
inter new mailing address, if applicable:	1555 N. Treasure Drive. Suite # 212 North Bay Village		
Mailing address MAY BE A POST OFFICE BOX)			
-	_		
3. If amending the registered agent and/or regis gent and/or the new registered office address he		address on our records, <u>enter the name of the new registe</u>	
Name of New Registered Agent: P	EAK CORP		
New Registered Office Address:	6475 Golf Clu	ab Rd. Suite # 304	
	_	Enter Florida street address	
W	Veston	. Florida ³³³²⁶	

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.

City

If Changing Begistered Agent, Signature of New Registered Agent

Zip Code

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
MGR	JOSE A. VASQUEZ	895 NW 132nd Ave.	= Add
		Pembroke Pines Fl. 33028	
			□ Change
MGR	GERMAN D. VASQUEZ	1555 N. Treasure Drive Suite # 212	
		North Bay Village, Fl. 33141	≣Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change

). If ame	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effe <u>Note:</u>	ve date, if other than the date of filing:
he record ord is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
Dated_	Sep 23 202/. Signature of a member or authorized representative of a member)
	Signature of a member of authorized representative of a member)
	GERMAN D. VASQUEZ
	Typed or printed name of signee

Filing Fee: \$25.00