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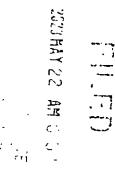




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7/18/23 VLN



COVER LETTER

TO: Registration Section
Division of Corporations

4722 NW 120TH WAY 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:	
	MICHAEL LOPEZ		
		Name of Person	
	9005 VISTA WAY	Firm/Company	
	PARKLAND, FL 33076	Address	
	GUANIN@VERIZON.NET	City/State and Zip Code	
	E-mail address: (to be used for future annual report notifica	ition)
For further information of	concerning this matter, please ca	all:	
MICHAEL LOPEZ		917 881-6265	
Name o	f Person	at () Area Code Daytime To	elephone Number
Enclosed is a check for t	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)

Mailing Address:

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

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

4722 NW 120TH WAY LLC

(Name of the Limited Lia (A Flo	ability Compa orida Limited	any as it now appears on our re Liability Company)	cords.)
The Articles of Organization for this Limited Liabilit Florida document number L14000071259	and assigned		
This amendment is submitted to amend the following	<u>g</u> :		
A. If amending name, enter the new name of the	limited liah	ility company here:	
LOPEZ PEREZ HOLDINGS LLC			
The new name must be distinguishable and contain the words	Limited Liabi	lity Company," the designation	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		9005 VISTA WAY	
(Principal office address MUST BE A STREET AL		PARKLAND, FL 33076	₹± ८-:: <u>Т</u> ₹
	<u> </u>		>- · ! -≺
		(7)	
Enter new mailing address, if applicable:		9005 VISTA WAY	
(Mailing address MAY BE A POST OFFICE BOX)	PARKLAND, FL 33076	: : 0
	_		177
Name of New Registered Agent:	re: ICHAEL LO	PEZ	nter the name of the new registers
New Registered Office Address:	05 VISTA W 		
DA	Enter Florida street address PARKLAND		33076
	City		, Florida Zip Code
New Registered Agent's Signature, if changing Regist	tered Agent:		rap conc
I hereby accept the appointment as registered ago provisions of all statutes relative to the proper an accept the obligations of my position as registered being filed to merely reflect a change in the regist company has been notified in writing of this chan	d complete d agent as _l tered office	performance of my dutie, provided for in Chapter 6	s, and I am familiar with and 05, F.S. Or, if this document is

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
	 		□Add
			□Remove
			□Change
			□Add
			□Remove
		· · · · · · · · · · · · · · · · · · ·	□Change
			
		.	□Remove
			Change
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			□Change
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			□Remove
			□Chan∽e

Effective date, if other than the date of filing:								
(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 605.0207 (2. 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. The record 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 ord is filed. MAY 15 Dated Signature of a member or authorized representative of a member								
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	Dated		2	_ ·				
MICHAELLOPEZ			Signature o	f a member or auth	orized representativ	e of a member		
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