

L19 0000 37574

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

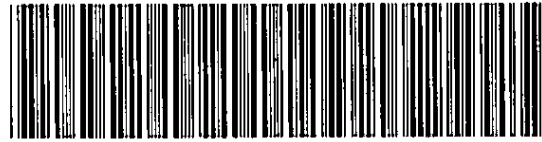
(Business Entity Name)

(Document Number)

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2021 JUN -7 AM 11:06
STATE OF TEXAS
FALLS CHURCH
TX 75745

D. BRUCE
JUL 09 2021

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 3070 CORAL INVESTMENTS LLC.
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MIGUEL BUBIS
Name of Person
3070 CORAL INVESTMENTS LLC.
Firm/Company
20808 W DIXIE HWY
Address
MIAMI, FL 33180
City/State and Zip Code
ACCOUNTING@EMUNA CONSTRUCTION.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LUIS FERNANDEZ at (305) 792-1313
Name of Person 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
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

RECEIVED
TALLAHASSEE, FL
2021 JUL -7 AM 11:05
F-11-2021

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

3070 CORAL INVESTMENTS 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 FEBRUARY 14, 2019 and assigned Florida document number L19000037574.

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:

20808 W DIXIE HWY, MIAMI FL 33180

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

20808 W DIXIE HWY, MIAMI FL 33180

(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:

2031 Harrison Street

Enter Florida street address

Hollywood

City

Florida

33020

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 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>
MGR	MIGUEL BUBIS		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		20808 W DIXIE HWY, MIAMI FL 33180	<input checked="" type="checkbox"/> Change
MGR	ANDRES HASMANN		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		20808 W DIXIE HWY, MIAMI FL 33180	<input checked="" type="checkbox"/> Change
MGR	JOSEPH DUM		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		20808 W DIXIE HWY, MIAMI FL 33180	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2021 JUN - 7 AM 11:06
 OFFICE OF THE
 TALLAHASSEE
 COUNTY
 CLERK

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

2021 JUN -7 AM 11:05
 REGISTRAR
 ALL INFORMATION CONTAINED
 HEREIN IS UNCLASSIFIED
 DATE 11/27/07 BY [illegible]

E. Effective date, if other than the date of filing: MARCH 15, 2021 (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 605.0207 (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.

If 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 record is filed.

Dated MAY 28 _____, 2021

 Signature of a member or authorized representative of a member
MIGUEL BUBIS

 Typed or printed name of signee