

L19000110460  
 Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

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~~4TH REQUEST~~

To: Division of Corporations  
 Fax Number : (850)617-6383

From: Account Name : STEARNS WEAVER MILLER WEISSLER ALHADEFF & SITTERSON  
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Email Address: cg@ahsresidential.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**  
**VILLAGE AT OLD CUTLER, LLC**

Certificate of Status	0
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FILED  
 2022 MAY 29 PM 4:42  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**4th Request - Please file and honor original date of submission 4/27/22 as the effective filing date.**

Electronic Filing Menu

Corporate Filing Menu

T. HAMIEUX

MAY - 9 2022

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

VILLAGE AT OLD CUTLER, 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 04/30/2019 and assigned Florida document number L19000116460.

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

\_\_\_\_\_, Florida

City

\_\_\_\_\_, 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.*

FILED  
MAY 1 2019  
TALLAHASSEE  
FLORIDA  
11:42

\_\_\_\_\_  
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>
MGR	Ernesto Lopes	12895 SW 132nd Street	<input type="checkbox"/> Add
		Miami, FL 33186	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AR	Carlos E. Gonzalez	12895 SW 132nd Street	<input type="checkbox"/> Add
		Miami, FL 33186	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AR	Ricardo Blas	12895 SW 132nd Street	<input type="checkbox"/> Add
		Miami, FL 33186	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AR	Caixeta Thiago	12895 SW 132nd Street	<input type="checkbox"/> Add
		Miami, FL 33186	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AR	Batista Fabrizio	12895 SW 132nd Street	<input type="checkbox"/> Add
		Miami, FL 33186	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AR	Oswaldo J. Marchante	12895 SW 132nd Street	<input type="checkbox"/> Add
		Miami, FL 33186	<input checked="" type="checkbox"/> Remove
		Please see attachment for additional names	<input type="checkbox"/> Change

**ATTACHMENT TO  
ARTICLES OF AMENDMENT  
OF  
VILLAGE AT OLD CUTLER, LLC  
Document No. L19000116460**

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**

<b>Title</b>	<b>Name</b>	<b>Address</b>	<b>Type of Action</b>
AMBR	Old Cutler JV LLC	12895 SW 132 <sup>nd</sup> St. Miami, FL 33186	Add
Chief Executive Officer/President	Ernesto Lopes	12895 SW 132 <sup>nd</sup> St. Miami, FL 33186	Add
Chief Investment Officer/Authorized Representative	Carlos E. Gonzalez	12895 SW 132 <sup>nd</sup> St. Miami, FL 33186	Add
Chief Administrative Officer/Authorized Representative	Oswaldo J. Marchante	12895 SW 132 <sup>nd</sup> St. Miami, FL 33186	Add
Chief Operating Officer/Authorized Representative	Ricardo Blas	12895 SW 132 <sup>nd</sup> St. Miami, FL 33186	Add
Chief Financial Officer/Authorized Representative	Thiago Caixeta	12895 SW 132 <sup>nd</sup> St. Miami, FL 33186	Add
Chief Technology Officer/Authorized Representative	Fabrizio Batista	12895 SW 132 <sup>nd</sup> St. Miami, FL 33186	Add

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

Article IV of the Company's Articles of Organization is hereby removed and replaced with the following

new Article IV:

ARTICLE IV - MANAGEMENT

The Company shall be member managed. The name and address of the sole member of the Company is:

Old Cutler JV LLC, 12895 SW 132nd Street, Miami, FL 33186.

E. Effective date, if other than the date of filing: \_\_\_\_\_ (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 April 26 2022

  
Signature of a member or authorized representative of a member

Carlos E. Gonzalez

Typed or printed name of signer

Filing Fee: \$25.00