

11/18/2020

L 2000016994S

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

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((H20000395977 3))



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

From: Account Name : ALVAREZ, SUAZO & ASSOCIATES
Account Number : I20130000076
Phone : (305)388-7028
Fax Number : (305)479-2705

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

LLC AMEND/RESTATE/CORRECT OR M/MG RESIGN
ESTEVEZ PROPERTIES GROUP LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

FILED
2020 NOV 16 AM 9:37
SEC. OF STATE

RECEIVED

2020 NOV 16 PM 3:28

Electronic Filing Menu Corporate Filing Menu Help

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

ESTEVEZ PROPERTIES GROUP 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 06/18/2020 and assigned Florida document number: L20000169945

This amendment is submitted to amend the following:

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

N/A

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: N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: N/A

(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: N/A

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.

N/A

If Changing Registered Agent, Signature of New Registered Agent

FILED
2020 NOV 16 AM 9:57
CLERK OF CIRCUIT COURT
JUDICIAL CIRCUIT IN AND FOR
DADE COUNTY FLORIDA

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>
AMBR	ESTEVEZ CRUZ, LEONARDO	88 SW 7TH STREET - APT. 3109	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33130	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ESTEVEZ CRUZ, PABLO	88 SW 7TH STREET -APT. 3109	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33130	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ESTEVES SANDOVAL, LEONARDO	PLEASE CORRECT SPELLING ON LAST NAME	<input type="checkbox"/> Add
	(CURRENT SPELLING)	CORRECT SPELLING ESTEVEZ SANDOVAL	<input type="checkbox"/> Remove
			<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
			<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.)*

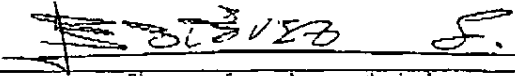
E. Effective date, if other than the date of filing: _____ (optional)

(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 11/12/2020

X 

Signature of a member or authorized representative of a member

LEONARDO ESTEVEZ SANDOVAL

Typed or printed name of signer