

8/17/2021

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**L20000297601**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000309483 3)))



H210003094833ABC/

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

From: Account Name : AGI REGISTERED AGENTS, INC.  
Account Number : 12000000205  
Phone : (305)416-6800  
Fax Number : (305)416-6811

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

Email Address: jose@agi-ra.com

FILED  
2021 AUG 17 PM 2:01

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
COSTAIA, LLC

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 01      |
| Estimated Charge      | \$25.00 |

2021 AUG 17 PM 3:06

STATE OF FLORIDA  
ALLAH SSE C. FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

BB  
8/18/21

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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COSTAIA, 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 September 21, 2020 and assigned Florida document number L20000297601

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)

1800 SW 1st Ave.

Suite 601

Miami, FL 33129

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1800 SW 1st Ave.

Suite 601

Miami, FL 33129

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

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.

If Changing Registered Agent, Signature of New Registered Agent

(((H21000309483 3)))

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR = Manager  
AMBR = Authorized Member

| <u>Title</u> | <u>Name</u>          | <u>Address</u>     | <u>Type of Action</u>                      |
|--------------|----------------------|--------------------|--|
| MGR          | Pietri, Patricia M.  | 1000 Brickell Ave. | <input type="checkbox"/> Add               |
|              |                      | Suite 300          | <input checked="" type="checkbox"/> Remove |
|              |                      | Miami, FL 33131    | <input type="checkbox"/> Change            |
| MGR          | Pietri, Patricia M.  | 1800 SW 1st Ave.   | <input checked="" type="checkbox"/> Add    |
|              |                      | Suite 601          | <input type="checkbox"/> Remove            |
|              |                      | Miami, FL 33129    | <input type="checkbox"/> Change            |
| MGR          | Pietri, Jose Antonio | 1800 SW 1st Ave.   | <input checked="" type="checkbox"/> Add    |
|              |                      | Suite 601          | <input type="checkbox"/> Remove            |
|              |                      | Miami, FL 33129    | <input type="checkbox"/> Change            |
| MGR          | Pietri, Oscar A.     | 1800 SW 1st Ave.   | <input checked="" type="checkbox"/> Add    |
|              |                      | Suite 601          | <input type="checkbox"/> Remove            |
|              |                      | Miami, FL 33129    | <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            |

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