

L2100029072

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

From:
Account Name : ALEGEN FLEET, LLC
Account Number : 120210000134
Phone : (847)687-2318
Fax Number : (847)687-2318 8

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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

LA PERLA CONDO UNIT 3009 LLC

Certificate of Status	0
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2021 AUG -2 AM 8:14

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

2021 AUG -2 PM 4:58
FILED

BB
8/2/21

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

(((H21000290891 3)))

LA PERLA CONDO UNIT 3009 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 06/18/2021 and assigned
Florida document number L21000285072

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)

16999 COLLINS AVE, UNIT 3009

SUNNY ISLES BEACH, FL 33160

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

21708 ACORN CT

KILDEER, IL 60047

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: MARINA KRAFT

New Registered Office Address: 16999 COLLINS AVE, UNIT 3009

Enter Florida street address

SUNNY ISLES BEACH, Florida 33160

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.



If Changing Registered Agent, Signature of New Registered Agent

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

(((H21000290891 3)))

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	MARINA KRAFT	16999 COLLINS AVE, UNIT 3009	☒ Add
		SUNNY ISLES BEACH, FL, 33160	☐ Remove
			☐ Change
MGR	NATALIA ALEXANINA	16999 COLLINS AVE, UNIT 3009	☒ Add
		SUNNY ISLES BEACH, FL, 33160	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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

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

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 July 30, 2021

Kap

Signature of a member or authorized representative of a member

MARINA KRAFT

Typed or printed name of signee