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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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 AMND/RESTATE/CORRECT OR M/MG RESIGN MALO FAMILY INVESTMENTS FOUR, LLC

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Corporate Filing Menu

Help JAN 23 2073 K Brumbles

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MALO FAMILY INVESTMENTS FOUR, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

	(A Florida Limited I	Liability Company)				
	ticles of Organization for this Limited Liability Company document number <u>L22000513251</u>	were filed on 12/06/2022		and	assign	ied
This ar	nendment is submitted to amend the following:					
A. If a	mending name, enter the new name of the limited liab	ility company here:				
The new	name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "	LLC" or the a	abbreviation	"L.L.C	- 16
Enter	new principal offices address, if applicable:					
(Princ	pal office address MUST BE A STREET ADDRESS)					
	new mailing address, if applicable:					
	ng address MAY BE A POST OFFICE BOX)			<u> </u>		
Munn	ig dudress bist be a rost of field box					
	mending the registered agent and/or registered office a and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:			:- ' :- :- :- :	2023 JAN 20 KH	ATTAO V
		Enter Florida street ad	dress		<u>ښ</u> بن	-
		City	, Florida	Zip Ca	<u> </u>	
Care Di	egistered Agent's Signature, if changing Registered Agent:	Cuy		2.41 (2.	are.	
herel provisi accept being)	by accept the appointment as registered agent and agrounce of all statutes relative to the proper and complete the obligations of my position as registered agent as pilled to merely reflect a change in the registered office my has been notified in writing of this change.	performance of my duties provided for in Chapter 60	, and I am 95, F.S. Or	familiar , if this d	with a ocume	ınd
	1f Chan	ging Registered Agent, Signatu	ire of New R	egistered A	gent	

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>	Name	Address	Type of Action
MGR	Manuel Antonio Malo Vidal	8655 PINES BLVD.	
		PEMBROKE PINES, FL 33024	□ Remove
			□Change
MGR	Juan Jose Malo	8655 PINES BLVD.	= Add
		PEMBROKE PINES, FL 33024	70
			☐ Change
***************************************			□Add
			□Change
			
			□ Remove
			□Change
	· · · · · · · · · · · · · · · · · · ·		
			
			□ Change
			□ Remove
			Change

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			·	
				
-			- -	

ffective date, if other than the an effective date is listed, the date must state. If the date inserted in this blocument's effective date on the December 2.	ock does not meet the appl	icable statutory filing re	(optional) than 90 days after filing.) Pursuan quirements, this date will not	u to 605,0207 be listed as
record specifies a delayed effective d is filed.	e date, but not an effective	time, at 12:01 a.m. on t	he earlier of: (b) The 90th d	ay after the
January 19 Pated	2023			
Dated January 19 Low Ullund	Signature of a member or aut			

Filing Fee: \$25.00