M20CCCCC09541

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Wrong form / Certificate

Office Use Only

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03/21/22--01012--018 **25.00

FILED
2022 APR 18 AM 11:21
SECRETARY OF STATE
TALLAHASSEE, FL

A. BUTLER

MAY 11 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CORADO PASTANA LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JUSTIN M. HAYS
Name of Person

CHURCH CHURCH HITTLE + ANTRIM
Firm/Company

2 N. 9TH ST.
Address

NOBLESVILLE, IN 460606
City/State and Zip Code

JHAYS@CCHALAW.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JUSTIN M. HAYS at (317) 773-2190
Name of Person — Area Code & Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☐ $25 Filing Fee ☐ $30 Filing Fee & Certificate of Status ☐ $55 Filing Fee & Certified Copy ☐ $60 Filing Fee, Certificate of Status & Certified Copy

CR2E055 (9/15)

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of State: CORADO PASTANA LLC

Enter new principal office 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) _____

_____

2. The Florida document number of this limited liability company is: M20000009541

3. Jurisdiction of its organization: INDIANA

4. Date authorized to do business in Florida: OCTOBER 19, 2020

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: CORADO PASTRANA LLC
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

_____

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer 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.

_____
If Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

_____

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

_____

Title/ Capacity	Name	Address	Type of Action
_____	_____	_____	☐Add
		_____	☐Remove
_____	_____	_____	☐Add
		_____	☐Remove
_____	_____	_____	☐Add
		_____	☐Remove
_____	_____	_____	☐Add
		_____	☐Remove
_____	_____	_____	☐Add
		_____	☐Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

_____
Signature of the authorized representative

JUSTIN M. HAYS

_____
Typed or printed name of signee

Filing Fee: $25.00

State of Indiana
Office of the Secretary of State

Certified Copies

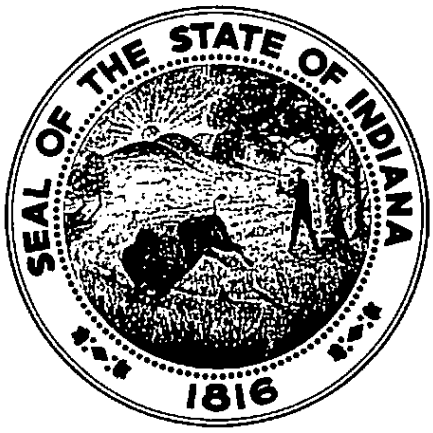
To Whom These Presents Come, Greeting:

I, HOLLI SULLIVAN, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that this is a true and complete copy of this **3** page document consisting of the following records filed in this office:

Certification Date: April 12, 2022
Business Name: CORADO PASTRANA LLC
Business ID: 2014022800818

Transaction	Date Filed	No. of pages
Articles of Amendment	10/01/2021	3
	Total No. of pages	3



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, April 12, 2022

HOLLI SULLIVAN
SECRETARY OF STATE

2014022800818 / 14607183
All certificates should be validated here: https://bsd.sos.in.gov/ValidateCertificate
Expires on May 12, 2022.

State of Indiana
Office of the Secretary of State

Certificate of Amendment
of

CORADO PASTRANA LLC

I, HOLLI SULLIVAN, Secretary of State, hereby certify that Articles of Amendment of the above Domestic Limited Liability Company have been presented to me at my office, accompanied by the fees prescribed by law and that the documentation presented conforms to law as prescribed by the provisions of the Indiana Code.

NOW, THEREFORE, with this document I certify that said transaction will become effective Friday, October 01, 2021.

In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, October 01, 2021

HOLLI SULLIVAN
SECRETARY OF STATE

2014022800818 / 9170795

To ensure the certificate's validity, go to https://bsd.sos.in.gov/PublicBusinessSearch

APPROVED AND FILED
HOLLI SULLIVAN
INDIANA SECRETARY OF STATE
10/01/2021 09:57 AM

ARTICLES OF AMENDMENT

ARTICLE I - NAME AND PRINCIPAL OFFICE ADDRESS

BUSINESS ID	20140222800818
BUSINESS TYPE	Domestic Limited Liability Company
BUSINESS NAME	CORADO PASTRANA LLC
PRINCIPAL OFFICE ADDRESS	160 West Carmel Dr, Suite 232, Carmel, IN, 46032, USA
DATE AMENDMENT WAS ADOPTED	10/01/2021

EFFECTIVE DATE

EFFECTIVE DATE	10/01/2021
EFFECTIVE TIME	09:55AM

ARTICLE I - GOVERNING PERSON INFORMATION

DATE OF ADOPTION	10/01/2021
TITLE	Member
NAME	Megan Pastrana
ADDRESS	160 W. Carmel Drive, Suite 232, Carmel, IN, 46032, USA

MANAGEMENT INFORMATION

THE LLC WILL BE MANAGED BY MANAGER(S)	No
IS THE LLC A SINGLE MEMBER LLC?	Yes

APPROVED AND FILED
HOLLI SULLIVAN
INDIANA SECRETARY OF STATE
10/01/2021 09:57 AM

SIGNATURE

THE MANNER OF THE ADOPTION OF THE ARTICLES OF BUSINESS AMENDMENT CONSTITUTE FULL LEGAL COMPLIANCE WITH THE PROVISIONS OF THE ACT, AND THE ARTICLES OF ORGANIZATION.

THE UNDERSIGNED MANAGER OR MEMBER OF THIS LIMITED LIABILITY COMPANY EXISTING PURSUANT TO THE PROVISIONS OF THE INDIANA BUSINESS FLEXIBILITY ACT DESIRES TO GIVE NOTICE OF ACTION EFFECTUATING BUSINESS AMENDMENT OF CERTAIN PROVISIONS OF ITS ARTICLES OF ORGANIZATION.

IN WITNESS WHEREOF, THE UNDERSIGNED HEREBY VERIFIES, SUBJECT TO THE PENALTIES OF PERJURY, THAT THE STATEMENTS CONTAINED HEREIN ARE TRUE, THIS DAY **October 1, 2021.**

THE UNDERSIGNED ACKNOWLEDGES THAT A PERSON COMMITS A CLASS A MISDEMEANOR BY SIGNING A DOCUMENT THAT THE PERSON KNOWS IS FALSE IN A MATERIAL RESPECT WITH THE INTENT THAT THE DOCUMENT BE DELIVERED TO THE SECRETARY OF STATE FOR FILING.

SIGNATURE	Ellen Eagleson
TITLE	Authorized Agent

Business ID : 2014022800818
Filing No. : 9170795

FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2022 APR 18 AM 11:47

SECRETARY OF STATE
TALLAHASSEE, FL

April 6, 2022

JUSITN M. HAYS
2 N. 9TH STREET
NOBLESVILLE, IN 46060

SUBJECT: CORADO PASTANA LLC
Ref. Number: M20000009541

We have received your document for CORADO PASTANA LLC and your check(s) totaling $25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA LIMITED LIABILITY COMPANY, but your entity is a FOREIGN LIMITED LIABILITY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler
Regulatory Specialist II

Letter Number: 922A00007952