

L14000082384

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

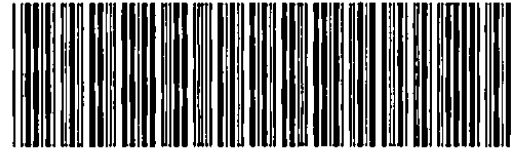
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL
MARCH 27 2019

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 7831 SE PARADISE DR LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Frederick P. Viener

Name of Person

C/O Remax Advance Realty

Firm/Company

11010 SW 88 ST #200

Address

MIAMI, FL 33176

City/State and Zip Code

reo@sellingmiami.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Frederick Viener

305

251-2127 Ext. 6152

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

7831 SE PARADISE DR 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 5/21/2014 and a
Florida document number L14000082384.

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 "

Enter new principal offices 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)

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:

Frederick P. Viener


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

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

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type</u>
MGR	Frederick P. Viener	11010 SW 88 ST #200 Miami, FL 33176	<input checked="" type="checkbox"/> A
			<input type="checkbox"/> R
			<input type="checkbox"/> C
MGR	Rise Siegrist		<input type="checkbox"/> A
		Rise Siegrist - 11010 SW 88 ST #200 Miami, FL 33176	<input checked="" type="checkbox"/> R
			<input type="checkbox"/> C
			<input type="checkbox"/> A
			<input type="checkbox"/> R
			<input type="checkbox"/> Ch
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