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2019 NOV -4 AM 8: 25



COVER LETTER

SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Chloe Di Pietro Vargas		
		Name of Person	
	Cervera Real Estate		
		Firm/Company	
	325 S. Biscayne Blvd, Sui	te 200	
		Address	
	Miami, FL 33131		
		City/State and Zip Code	
	confidantepm@gmail.com		
	E-mail address: (to be used for future annual report notif	fication)
For further information c	concerning this matter, please co	all:	
Chloe Di Pietro Vargas		786 597-4036 at ()	
Name o	of Person	at () Area Code Daytime	e Telephone Number
Enclosed is a check for t	he 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:

TO:

Registration Section

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

CONFIDANTE PROPERTY MANAGMENT 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 $\frac{9/27/2019}{1}$ Florida document number 1.19000244864 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: CONFIDANTE PROPERTY MANAGEMENT LLC 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Tame of the new B. If amending the registered agent and/or registered office address on our records, enter the registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

. Florida

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			☐ Change
			Add
			Remove
			☐ Change
			Add
			□ Remove
			□ Change
			Remove
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f an effective date is listed, the date mu Note: If the date inserted in this b document's effective date on the £	ist be specific and cannot be pric lock does not meet the appli	cable statutory filing re-	han 90 days after filing.) Pursua	nt to 605,0207 (t be listed as t
ne record specifies a delaye The 90th day after the rec		ot an effective time	e, at 12:01 a.m. on the	e earlier of:
November 1 Dated	2019			
		<u> </u>		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00