## L15 000140210

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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## COVER LETTER

Registration Section Division of Corporations

TO:

	ERTY LLC		
SUBJECT:	Name of Limi	ted Liability Company	-
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	ARTURO SISO		
		Name of Person	
	7223 PROPERTY LLC		
		Firm/Company	
	1000 Brickell Avenue, Suit	te 700	
		Address	
	Miami FL 33131		
		City/State and Zip Code	
	avgroup20@gmail.com		_
	E-mail address: (	to be used for future annual report notification)	
For further information of	oncerning this matter, please co	all:	
ARTURO SISO		305 6037189 at ()	
Name o	n' Person	Area Code Daytime Telephone Num	ber
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certif (additional copy is enclosed) Certif	) Filing Fee, licate of Status & led Copy onal copy is enclosed)
Mailing Addre Registration Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suit	e 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

7223 PROPERTY LLC				9 13	יים.
( <u>Name of the Limited</u> (A	Liability Compa Florida Limited	iny as it now appears on ou Liability Company)	r records.)		F.(1Z)
The Articles of Organization for this Limited Lial lorida document number £15000140210	oility Company	were filed on 08/17/201	5	and assigned	
his amendment is submitted to amend the follow	ving:				
If amending name, enter the new name of t	he limited liab	oility company here:			
he new name must be distinguishable and contain the wor	rds "Limited Liabi	ility Company," the designati	on "LLC" or the ab	breviation "L.L.C."	-
Inter new principal offices address, if applical	ble:	1000 Brickell Avenue.	Suite 700		_
Principal office address MUST BE A STREET		Miami, FL 33131			
meijai opiet aan eest too too					- 
Enter new mailing address, if applicable: "Mailing address MAY BE A POST OFFICE BOX")		1000 Brickell Avenue.	Suite 700		_
		Miami, FL 33131			_
<ol> <li>If amending the registered agent and/or regent and/or the new registered office address</li> </ol>	gistered office here: Arturo Siso	address on our records	s, <u>enter the nam</u>	ie of the new regist	<u>ered</u>
Name of New Registered Agent:	Arturo 3130			· <del></del>	<del></del>
New Registered Office Address:	1000 Brickell Avenue. Suite 700  Enter Florida street address				
	NC and	Enter Florida sire		121	
	Miami ————	City	, Florida	131 Zip Code	_
New Registered Agent's Signature, if changing Re	egistered Agent	:			

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 being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	EDUARDO VELAZCO	1000 Brickell Avenue. Suite 700. Miami FL 33131	<b>=</b> Add
			Remove
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			□Remove
			Change
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ective date, if other to effective date is listed, the te: If the date inserted nument's effective date	e date must be specific an in this block does not	d cannot be prior to d meet the applicable	ate of filing or more that statutory filing requ	(optional) n 90 days after filing.) Pur irements, this date will	rsuant to 605,020 , not be listed a
cord specifies a delaye s filed.	d effective date, but no	an effective time	at 12:01 a.m. on the	earlier of: (b) The 90	Ith day after th
ed August 04		2020			
	Signature of a	member or authoriz	ed representative of a n	nember	
	1	17 1			

Filing Fee: \$25.00