L21000099677

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
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COVER LETTER

TO: Registration So Division of Cor			e e
	STONE-RD, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	emitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	BARBARA GARCIA, ES	Q	
		Name of Person	
	BG LAW, PA		
		Firm/Company	.
	999 PONCE DE LEON B	LVD PENTHOUSE SUITE 1105	
	<u> </u>	Address	
	CORAL GABLES, FL 33	134	
		City/State and Zip Code	.
	BARBIE@GARCIALAWI		
		to be used for future annual report not	ification)
For further information of	oncerning this matter, please c	all:	
BARBARA GARCIA, ESQ		786 4315779	
Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne 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 Addres Registration		<u>Street Address:</u> Registration Se	ection
Division of C		Division of Co	
P.O. Box 632	.7	The Centre of	Гallahassee
Tallahassee,	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

145 FIELDSTONE RD. 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 03-01-2021 and assigned Florida document number 121000099677 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 "L.L.C." 6001SW 85TH AVENUE Enter new principal offices address, if applicable: MIAMI FL 33143 (Principal office address MUST BE A STREET ADDRESS) 6001 SW 85TH AVENUE Enter new mailing address, if applicable: MIAMI FL 33143 (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: 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.

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>	<u>Name</u>	Address	Type of Action
MGR	NORA GONZALEZ	6001 SW 85TH AVENUE	■Add
		MIAMI FL 33143	□Remove
			□Change
MGR	BARBARA GARCIA	999 PONCE DE LEON BLVD	□ Add
		PENTHOUSE SUITE 1105	■Remove
		CORAL GABLES FL 33134	□Change
			Add Service Difference
			CO GAdd
			□ Remove
			□Change
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	repartment of State's records.			
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Filing Fee: \$25.00

Docusigned by:	Signature of a mi					
May 4 DocuSigned by:		2021				
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iment's effective date on the D	epartment of Su	ate's records.				
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Filing Fee: \$25.00