# 121000327476

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(F	Requestor's Name)
(A	Address)
<b>A</b> )	Address)
)	
(0	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(E	Business Entity Name)
(0	Document Number)
Certified Copies	Certificates of Status
Special Instructions t	o Filing Officer:
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Office Use Only



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### FLORIDA DEPARTMENT OF STATE Division of Corporations

December 3, 2021

DANIEL MARZANO, ESQ. 14261 COMMERCE WAY SUITE 205 MIAMI LAKES, FL 33016

SUBJECT: 15701 NW 127 AVE INDUSTRIAL LLC

Ref. Number: L21000327476

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

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.

Letter Number: 421A00029101

Querida R Silas Regulatory Specialist II

www.sunbiz.org

## COVER LETTER

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

	127 AVE INDUSTRIAL LLC			
SUBJECT:	Name of Limi	ited 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:		
	DANIEL MARZANO, ES	Q.		
		Name of Person	<del></del>	
	COSCULLUELA & MAR	ZANO, P.A.		
		Firm/Company		
	14261 COMMERCE WAY, SUITE 205			
		Address		
	MIAMI LAKES. FLORID	A 33016		
	D. ( . D. 7 . V. o O C. V. D. J. A.)	City/State and Zip Code	<del></del>	
	DMARZANO@CMPALAV E-mail address: (	to be used for future annual report no	tification)	
For further information c	oncerning this matter, please c			
DANIEL MARZANO, E	SQ.	305 817-2170		
Name of Person		Area Code Daytin	ne Telephone Number	
Enclosed is a check for the	ne following amount:			
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addres		<u>Street Address:</u> Registration S	action	
Registration : Division of C		Division of Co		
P.O. Box 632		The Centre of		

2415 N. Monroe Street, Suite 810

Tallahassee. FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2021 DEC 16 PH 4: 27

15701 NW 127 AVE INDUSTRIA	l. LLC		offendates the even	7
(Name of the Limi	ted Liability Compa (A Florida Limited I	ny as it now appear Liability Company)	rs on our records	<b>.</b>
The Articles of Organization for this Limited L. Florida document number L21000327476	iability Company			ned
his amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	f the limited liab	ility company ho	ere:	
he new name must be distinguishable and contain the v	vords "Limited Liabil	lity Company," the c	designation "LLC" or the abbreviation "L.L.	<u>c."</u>
Enter new principal offices address, if applicable:		13201 MUSTANG TRAIL		
Principal office address MUST BE A STREET ADDRESS)		SOUTHWEST RANCHES FLORIDA 33330		
nter new mailing address, if applicable:  Mailing address MAYBE A POST OFFICE BOX)		13201 MUSTANG TRAIL SOUTHWEST RANCHES FLORIDA 33330		
B. If amending the registered agent and/or agent and/or the new registered office addre		address on our r	records, enter the name of the new	registe
Name of New Registered Agent:	LEONCIO & ASSOCIATES LLC			
New Registered Office Address:	14331 COMMI	ERCE WAY		
Try in registered Office Fragistic.		Enter Florida street address		
	MIAMI LAKE	S	Florida 33016	
		Cuy	Zip Cocie	

#### 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

Title	<u>Name</u>	Address	Type of Action
AMBR	Pds Property Holdings LLC	28-18 Steinway Street	□Add
		Astoria, NY 11103	■ Remove
			□Change
MGR	RODOLFO ALVAREZ	13201 MUSTANG TRAIL	≣Add
	·	SOUTHWEST RANCHES FLORIDA 33330	□Remove
			ΩChange
	<del></del>		
			□Remove
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f an effective date is <b>Note:</b> If the date	ilisted, the date must be inserted in this block	ate of filing:  - specific and cannot be p  t does not meet the app  irtiment of State's reco	rior to date of filing or plicable statutory fil	(option more than 90 days after fil ing requirements, this d	ing.) Pursuant to 605.020
record specifies : d is filed.	a delayed effective d	ate, but not an effectiv	re time, at 12:01 a.m	a. on the earlier of: (b)	The 90th day after the
OCTOBE	R I	. 2021	<u>.</u>		
Dated					
Oated 		gnature of a member or a	authorized representati	ve of a member	

Filing Fee: \$25.00