

L23000 173702

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

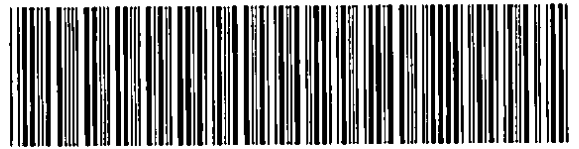
(Business Entity Name)

(Document Number)

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2023 MAY 16 PM 4:01

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BARRIOS - BALBIN, P.A.

Louis M. Barrios-Balbin
Attorney at Law
201 Alhambra Circle, Suite 500
Coral Gables, FL 33134

May 15, 2023

Via Federal Express

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street
Suite 810
Tallahassee, Florida 32303

Re: Articles of Amendment
Change of Name
Document Number L23000173702

Dear Madame or Sir:

Enclosed, please find my cover letter, and articles of amendment for a change of name of the limited liability company, along with a check, numbered 1934, in the amount of \$25.00 which represents the filing fee for the same. If you need any further information, please do not hesitate to contact me.

Very truly yours,



Louis M. Barrios-Balbin

LMBB/yv
Enclosures

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Lakeside Miami 262 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:

Louis M. Barrios-Balbin

Name of Person

Barrios-Balbin, P.A.

Firm/Company

201 Alhambra Circle, Suite 500

Address

Coral Gables, Florida 33134

City/State and Zip Code

louis@barriosbalbinpa.com

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

For further information concerning this matter, please call:

Louis M. Barrios-Balbin

Name of Person

at (305) 443-1923

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

[illegible]

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

E. Effective date, if other than the date of filing: _____ (optional)


(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated May 15, 2023

_____, 2023



Signature of a member or authorized representative of a member

Louis M. Barrios-Balbin

Typed or printed name of signee