L0200030072

(Re	questor's Name)	
bA)	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #	7)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name)
(Do	cument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	

Office Use Only



800327954138

04/18/19--01007--051 **********

FILED

19 APR 18 AM 18 32

SECRETARY OF STATE ALL AHASSEL FLORIDA

APR 26 2019 TSCHROEDER

COVER LETTER

TO: Registration Se Division of Cor			
1070 Prope			
SUBJECT:	Name of Lim	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:	
	Alex Montero		
		Name of Person	
		Firm/Company	·
	10521 SW 140 Street		
		Address	
	Miami, F1, 33176		
	amontero47/a],bcflsonth.net	Name of Person Firm/Company Address City/State and Zip Code net ss; (to be used for future annual report notification)	
	E-mail address: (to be used for future annual report notifi	ication)
For further information e	oncerning this matter, please of	all:	
Alex	Mualibo r Person	at (30X) Ql	18-6CM
Name o	f Person	Area Code Daytime	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 ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahussee, 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

1070 Property LLC		
(<u>Name of the Limited Liability C</u> (A Florida Li	Company as it now appears on our records.) inited Liability Company)	
The Articles of Organization for this Limited Liability Con Florida document number 1.02000030072	npany were filed on 11/08/2002	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
The new name must be distinguishable and contain the words "Lumtee	d Liability Company," the designation "LLC" or th	e appu Kiatio ZL.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u>(SS)</u>	8 F
Enter new mailing address, if applicable:		LORRO 26
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
B. If amending the registered agent and/or register registered agent and/or the new registered office addres		er the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Fiorida	
	City	Zip Code

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. Thereby 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	Alex Montero	10521 SW 140 Street, Miami, FL 33176	🗖 Add
			☐ Remove
	Dayunara Montero	10521 SW 140 Street, Miami, FL 33176	🗖 Add
			□ Remove
			☐ Change
			SSE CO
			Remove!
			Ar ≈ Add
			□ Remove
			Change
			□ Add
			Remove
	•		☐ Change
			Add
			Remove
			☐ Change

	<u>.</u>						
						<u> </u>	<u></u>
						· · · · · · · · · · · · · · · · · · ·	
							
							
					 		
						TA S	
					· · - ·		19 APR
						38 <u>%</u>	R 8
			<u> </u>			<u> </u>	<u>₹</u>
						LORIDA LORION	-कु 32
						<u>≯</u>	_ຄອ.
	<u> </u>						
ective date, if other than the effective date is listed, the date in	ust be specific	and cannot be p	rior to date of I	iling or more than	(option 90 days after fil	ling.) Pursuant	to 605.0
te: If the date inserted in this nument's effective date on the	block does n Department o	of meet the app of State's recor	olicable statu rds.	ory filing requir	ements, this d	ate will not b	e listed
record specifies a delayon he 90th day after the re	ed effectivecord is file	e date, but ed.	not an effe	ective time, a	it 12:01 a.r	n. on the	earlier
ed April 12		2019	·				
							

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00