## L04000021367

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SECRETARY OF STATE
STALL ARASSEE, FL

## COVER LETTER

CO: Registration Sec Division of Corp					
	erties, L.L.C.				
Name of Limited Liability Company					
The enclosed Articles of a	Amendment and fee(s) are subr	nitted for filing.			
Please return all correspon	ndence concerning this matter t	to the following:			
	Daniel Merino				
		Name of Person	. <u></u> .		
		rune of recon			
	R2C2 Properties, L.L.C.				
		Firm/Company			
	10761 NW 89th Ave				
		Address			
	Hialeah Gardens, FL 3301	8			
		City/State and Zip Code			
	dmerino@alliedtk.com				
	E-mail address: (t	to be used for future annual repo	ort notification)		
For further information c	oncerning this matter, please ca	all:			
Daniel Merino		786 55981			
Name o	f Person	Area Code [	Daytime Telepho	ne Number	
Enclosed is a check for th	ne following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclose		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	

TO:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

any as it now appears on our records.) Liability Company)	
were filed on March 18, 2004	and assigned
pility company here:	
ility Company," the designation "LLC" or th	he abbreviation "L.L.C."
	·
address on our records, enter the s	name of the new registe
Enter Florida street address	
<b>1911 - 7-1</b>	
	Ziv Code
	address on our records, enter the

## 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 Degict	ared Agent Signa	ture of New Register	od Agent
in Changing Regist	ered Agent, <u>Signa</u>	ture of New Register	eu Agem

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
VP	Claudio Jordan	10761 NW 89th Ave	<b>≣</b> Add
		Hialeah Gardens, FL 33018	□ Remove
			□ Change
VP	Daniel Merino	10761 NW 89th Ave	■Add
		Hialeah Gardens, FL 33018	
			□Change
			Remove
		<del></del>	Change
			□Remove
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O. If amending any other inform:	,		
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E. Effective date, if other than the (If an effective date is listed, the date monotone). If the date inserted in this bedocument's effective date on the I	ust be specific and cannot be prior a block does not meet the applica	to date of filing or more than 9 able statutory filing require	(optional) 0 days after filing.) Pursuant to 605.0207 (3) ments, this date will not be listed as the
If the record specifies a delayed effecti record is filed.	ive date, but not an effective tir	me, at 12:01 a.m. on the ea	rlier of: (b) The 90th day after the
Dated September 5	2024	·	
Mint	<b>^</b>		
the state of the s	Signature of a member or author	orized representative of a men	ber
Raul Sotolongo			

Typed or printed name of signee