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To:

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From:

Account Name : CARLOS WILLIARD & FLANAGAN, P.A.

Account Number: 120040000134 Phone: (305)444-1500

Fax Number : (305) 443-8617

RECEIVED PHILLS OF SECOND ON SON OF SECOND CONTROLL OF SUNSING

LIMITED LIABILITY AMENDMENT

S.W. 288 ST., LLC

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TRANSMITTAL LETTER

TO: Registration S Division of Co			
SUBJECT:S	W 288 St., LLC (Name of Li	mited Liability Company)	
	Ç 4	— — — — — — — — — — — — — — — —	
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.	
Please return all corres	pondence concerning this matter	r to the following:	
	Jeffrey M. F.	Lanagan, Esq. Name of Person)	
	Carlos Williard &	Flanagan. P.A.	05 JUL 20
995	Ponce de Leon.,	Rlvd Ste 1000 (Address)	AH 8: 57
_	Coral Gables, F) (City)	C. 33334 /State and Zip Code)	
For further information	concerning this matter, please	cail:	
Jeffre	t M. Flanagan		-1500
	(Name of Person)	(Arca Code & Daytime	Telephone Number)
Enclosed is a check for th	ė following amount:		
☐ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Pee & Certified Copy (additional copy is enclosed)	□ \$69.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regis Divis 409 E	EET ADDRESS: stration Section ion of Corporations E. Gaines Street hassee, Florida 32399	MAILING ADDRI Registration Section Division of Corpora P.O. Box 6327 Tallahassee, Florida	itions

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

****	s.w. 288 st	LLC (Parant Name)			2.		
		(Present Name) (A Florida Limited Liability (Company)				
FIRST:		zation were filed on 3/2/05	and assigned				
	document numberL	05000021099					
	- · · · · · · · · · · · · · · · · · · ·						
	liability company:	Article V is hereby	y amended as follo	WS:			
	The name and	address of the Mana	aging Member is:				
		Florida, LLC					
	9860 SW 140 Miami, Flori						
				05	S S		
				돌	22 22 23 23 23 24 25 25 25 25 25 25 25 25 25 25 25 25 25		
				L 20	PAT-		
Dated	July 11	2005					
13860			,	AH 8:	F ST POR		
				ယု	ATE		
		MI WA			ts		
	3 24	thur & a member or authorized repre	sentative of a member				
	<u> </u>	i. Flanagan, Esq.					
		Typed or printed name of	signee				

Filing Fee: \$25.00