1050000 49382

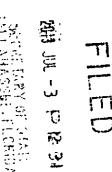
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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WUELLS TON

COVER LETTER

	tration Secon on of Corp			
	501 DOUG	GLAS, L.L.C.		
SUBJECT: _		Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub		
Please return al	ll correspoi	ndence concerning this matter	to the following:	
		CRISTOBAL INGELMO		
			Name of Person	
			Firm/Company	
,		1 GROVE ISLE DR 501		
			Address	
		COCONUT GROVE, FL	33133	
			City/State and Zip Code	
		ingelmoesther@gmail.com	to be used for future annual report notif	· ·
			•	ication)
For further info	rmation co	oncerning this matter, please ca	all:	
ESTHER ING	ELMO		305 546-2727	
Name of Person		Person	at () Area Code Daytime	Telephone Number
Enclosed is a cl	heck for th	e following amount:		
■ \$25.00 Fili		☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (udditional 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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF FILED

6501 DOUGLAS, L.L.C.

·	<u>- 10 € 10 € 10 € 10 € 10 € 10 € 10 € 10 </u>
(Name of the Limited Liability Company as it now appears officer records.)	- PU - 12 - U4
	• •-
(A Florida Limited Liability Company)	

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>	Name	Address	Type of Action
MGR	ESTHER INGELMO	I GROVE ISLE DR	
			☐ Remove
			Change
			Add
			□ Remove
			☐ Change
			D Add
			Remove
			Change
			Add
			Remove
			□ Change
			Remove
			Change
 			
			Remove
			☐ Change

Fffor	06/28/2019	
Note:	etive date, if other than the date of filing:	207 (as ti
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier e 90th day after the record is filed.	of:
Dated	$\frac{\text{JUNE 28}}{\sqrt{\frac{2019}{4}}}$	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00