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COVER LETTER

TO:

Registration Section

Div	ision of Cor	porations		<u>.</u>	
	PEREZ MA	CHADO PROPERTIES, LLC	·	•	
SUBJECT:	Name of Limited Liability Company				
The encloses	l Articles of	Amendment and fee(s) are sub	mitted for filing		
THE CHEIOSCE	Afficies of	Amendment and rec(s) are suo	mined for timing.		
Please return	all correspo	ndence concerning this matter	to the following:		
		CARLOS ALBERTO PER	EZ MACHADO		
			Name of Person		
			Firm/Company		
		11805 SW 46 STREET			
			Address		
		MIAMI, FL 33175			
			City/State and Zip Code		
		ALEXMONTEROCPA@G			
	•	E-mail address: (to be used for future annual report no	tification)	
For further in	oformation co	oncerning this matter, please co	all:		
CARLOS A		EREZ MACHADO	305 610-2526 at ()	me Telephone Number	
	Name of	f Person	Area Code Dayti	me Telephone Number	
Enclosed is a	check for th	ne following amount:			
■ \$25.00 I	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)	
	iling Addres		Street Address:	ection	
Registration Section Division of Corporations		Registration S Division of Co			
P.O. Box 6327			The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PEREZ MACHADO PROPERTIES, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

of for this Limited Liability Company were filed on 10/12/2005

The Articles of Organization for this Limited Li Florida document number L05000100350		vere filed on 10/12/20	005	and	assigned	i
This amendment is submitted to amend the follo	owing:					
A. If amending name, enter the new name of	the limited liabili	ty company here:				
The new name must be distinguishable and contain the w	ords "Limited Liability	Company," the designate	ntion "LLC" or the a	bbreviation	"L.L.C."	
Enter new principal offices address, if applica	able:					
(Principal office address MUST BE A STREE	T ADDRESS)					
				7	20190	
Enter new mailing address, if applicable:					DEC	T]
(Mailing address MAY BE A POST OFFICE)	BOX)				6 1	:
				<u>. </u>	-p	
B. If amending the registered agent and/or reagent and/or the new registered office address Name of New Registered Agent:	s here:	dress on our record		ne of the	<u>new-reg</u>	<u>istered</u>
New Registered Office Address:		Enter Florida st	reet address			
		City	, Florida	Zip Co	ode	
New Registered Agent's Signature, if changing R	legistered Agent:					
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as registeing filed to merely reflect a change in the recompany has been notified in writing of this company has been notified in writing the c	er and complete p stered agent as pr registered office a change.	erformance of my a ovided for in Chap	luties, and I am ter 605, F.S. Or, Mirm that the lii	familiar , if this d mited lia	with and ocument bility	d

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
MGRM	CARLOS PEREZ	11805 SW 46 STREET	
		MIAMI, FL 33175	■Remove
			□Change
MGRM	Carlos Alberto Perez Machado	11805 SW 46 STREET	≣ Add
		MIAMI, FL 33175	□Remove
			☐ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Remove
			□Change

D. II am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
,	
•	
•	
	
(If an et Note:	ive date, if other than the date of filing:
If the reco record is f	rd 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 led.
Dated	12-11-2019
Dated	
	Signature of a member or adthorized representative of a member
	CARLOS ALBERTO PEREZ MACHADO

Filing Fee: \$25.00

Typed or printed name of signee