Cara Con 135

(Red	questor's Name)	
(Add	dress)	
(Add	iress)	
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



400301021374

40:0801021874 07/05/17-01019-015 +425.00

FILED IN

O RRUCE JUL 07 2017

COVER LETTER

Division of Co	rporations			
SUBJECT: PRON	MENADE AT COMMERCIAL	LLC		
		nited Liability Company		
The enclosed Articles of	f Amendment and fee(s) are sul	bmitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	Jennifer Good	rich		
		Name of Person		
	Promenade at	Commercial LLC		
		Firm/Company		
	5632 Johnson	Street		
		Address		
	Hollywood, FI	2 33021 City/State and Zip Code		
	jetsubneh@gma	ail.com to be used for future annual report notificat	Ac. 2	
For further information of	concerning this matter, please co		17 JUL Cahar Lahar	
Jennifer	Goodrich	at (305) 498-6705	S	
Name o	f Person	Area Code Daytime Te	lephone Number	
Enclosed is a check for the	ne following amount:		I: 06 IATE CRIOA	J
\$25.00 Filing Fee \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed	

MAILING ADDRESS:

TƏ:

Registration Section

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

	Florida	Zip Code
New Registered Office Address:	Enter Florida street address	
Name of New Registered Agent:		
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	fice address on our records, <u>enter i</u>	he man of the n
	ASSEE.	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5632 Johnson Street Agent Hollywood, FL 33021	
(Principal office address MUST BE A STREET ADDRESS)	Hollywood, FL 33021	
Enter new principal offices address, if applicable:	5632_Johnson_Street	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the abb	reviation "L.L.C."
A. If amending name, <u>enter the new name of the limited liabi</u>	lity company here:	
This amendment is submitted to amend the following:		
Florida document number <u>L07000097935</u> .		
The Articles of Organization for this Limited Liability Company	were filed on 9/25/2007	and assigned
(Name of the Limited Liability Compar (A Florida Limited I.	ny as it now appears on our records.) hability Company)	
PROMENADE AT COMM		

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 Registered Agent, Signature of New Registered Agent

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
MGR	_Jennifer_Goodrich	_5632_Johnson_Street	Add
		Hollywood, FL 33021	□ Remove
			Change
MGR	- Maxwel-i-Pedro	6051-WCommercial Boulevard-	Add
		Tamarac, FL 33319	⊠ Remove
			Change
			🗖 Remove
		- A	D Change
		LAIIA.	Z Add T
		ALLAHASSEE.FLORIOA	P Remove
			Change
		<i>→</i>	🗆 Add
			□ Remove
			O Change
			Add
			Remove
		_	☐ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
217	_
A : U	<u> </u>
ASSET -	
——————————————————————————————————————	រា ៗ
χ+ Θ	
E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.	7 (3)(b) 8 the
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier o (b) The 90th day after the record is filed.	f:
Dated	
Signature of a member or authorized representative of a member	
Neville Pedro, Managing Member Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00