LABOOOS10147

(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



800272592688

05/05/15--01018--007 **150.00

2015 HAY -5 PM 3: 30

MAY 0 8 2015 D. BRUCE

COVER LETTER

Div	ision of Corpoi	rations				
SUBJECT:	2741 COR	AL WAY, LLC				
Sebucer.		Name of Limit	ted Liability Company			
The encloses	l Amialaa af Am	andmost and foo(s) are sub-	witted for filing			
The enclosed	Afficies of Air	nendment and fee(s) are subm	nitted for ming.			
Please return	all corresponde	ence concerning this matter t	o the following:			
		JOHN S. BOHATCH	, ESQ.			
			Name of Person			
		GUTTENMACHER,	BOHATCH & PENARANDA	, P.A.		
			Firm/Company			
		7301 SW 57th Court, Suite 560				
			Address			
		South Miami, FL 331	43			
			City/State and Zip Code			
	:	jbohatch@gbptaxlaw.				
	•		o be used for future annual report notific	ation)		
For further in	nformation conc	erning this matter, please ca	ll:		,	
JOHN S.	вонатсн	, ESQ.	305 666-1040		240 2	•
	Name of Pe	erson		elephone Number	IS HAY	77
Enclosed is a	check for the f	ollowing amount:			SER SER	-
■ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Certificate o Certified Co (additional copy	f Status & co py≟≥	

MAILING ADDRESS:

Registration Section

TO:

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

2741 Coral Way, LLC		
(<u>Name of the Limited Lia</u> (A Flo	ability Company as it now appears on our records.) orida Limited Liability Company)	·
The Articles of Organization for this Limited Liabilit Torida document number L0900010197	y Company were filed on 01/30/2009	and assigned
his amendment is submitted to amend the following	5 .	
A. If amending name, enter the new name of the l	limited liability company here:	
he new name must be distinguishable and end with the words		he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET AD	ODRESS)	
		:
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX	ranga da kanana da k	
· .	,	
3. If amending the registered agent and/or re	egistered office address on our records, <u>ent</u>	er The nathe of the
egistered agent and/or the new registered office a		
		WAY .
Name of New Registered Agent:		場等が
		THE 12
New Registered Office Address:	Enter Florida street address	<u> </u>
	Enter Frontal Street dadress	30
	, Florida	
	City	Zip Code

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 the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member **Type of Action Title** Name **Address** Peral, Eloy 3710 Riviera Drive MGR □ Add Coral Gables, FL 33134 ■ Remove MGR Peral, Elia 3710 Riviera Drive □ Add Coral Gables, FL 33134 ■ Remove MGR Peral Holdings, LLC 3710 Riviera Drive Coral Gables, FL 33134 ☐ Remove □ Add ☐ Remove

• • •	
•	
-	
ctive date, if other t	han the date of filing:(optional)
effective date must be spe	cific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after
effective date must be spe	cific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after by the Florida Department of State)
effective date must be spe date this document is filed	cific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after
effective date must be spe	cific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after by the Florida Department of State)
effective date must be spe date this document is filed	cific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after by the Florida Department of State)
effective date must be spe date this document is filed	cific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after by the Florida Department of State)
effective date must be spe date this document is filed	cific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after by the Florida Department of State)

Page 3 of 3

Filing Fee: \$25.00

205 MAY - 5 PM 3: 30