

L10000009833

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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☐

MAIL

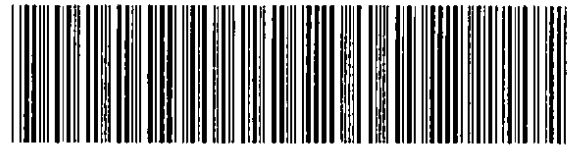
(Business Entity Name)

(Document Number)

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CLERK OF STATE
TALLAHASSEE, FL

[Handwritten signature]

COVER LETTER

**TO: Registration Section
Division of Corporations**

WELLINGTON 1504, LLC.

SUBJECT: _____
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cami Russack

Name of Person

RLC PA

Firm/Company

7999 N Federal Hwy STE 102

Address

Boca Raton FL 233487

City/State and Zip Code

Luis3382@Gmail.com (Annual Reports) Cami@RLCFirm.com (Notices Only)

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cami Russack

561 571 9602

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 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)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Wellington 1504 LLC

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

The Articles of Organization for this Limited Liability Company were filed on 01/27/2010 and assigned
Florida document number L10000009833.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Luis M Mieses Jr. Trustee, THE MIESES FAMILY TRUST

New Registered Office Address:

12172 Sawgrass Reserve BLVD

Enter Florida street address

Orlando

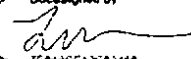
City

Florida 32824

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.

DocuSigned by:


If Changing Registered Agent, Signature of New Registered Agent

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SECRETARY OF STATE
TALLAHASSEE, FL

By 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>	<u>Address</u>	<u>Type of Action</u>
AMBR, MGR	THE MIESES FAMILY TRUST	Luis Manuel Mieses Jr, Trustee	<input checked="" type="checkbox"/> Add
		12172 Sawgrass Reserve BLVD	<input type="checkbox"/> Remove
		Orlando FL 32824	<input type="checkbox"/> Change
MGR	Luis M Mieses	11765 ST Andrews Place STE 101, Wellington FL 33414	<input type="checkbox"/> Add
		REMOVE: L M Mieses	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
Registered Agent	Luis M Mieses	4020 South 57th Ave STE 104, Lake Worth, FL 33463	<input type="checkbox"/> Add
		REMOVE: L M Mieses	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
VP	Danny Mieses	11765 ST Andrews Place Suite 101, Wellington FL 33414	<input type="checkbox"/> Add
		REMOVE: D Mieses	<input checked="" type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
VP	Frank J. Mieses	360 Chestwood Circle, Unit # 205, Royal Palm Beach, Florida 33411	<input type="checkbox"/> Add
		CHANGE: F Mieses address	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

