# L10000 118101

(Requestor's Name)
(Address)
(Address)
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, , , , , , , , , , , , , , , , , , ,
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, , ,
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Q. SILAS
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1110122

Office Use Only



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12/07/21--01011--008 \*\*25.00

2022 JAN 10 AM 11: 05



### **BECENCE**

### 2022 JAN 10 PM 3=15

## FLORIDA DEPARTMENT OF STATE Division of Corporations FELAHASSEE, FL

December 21, 2021

MARILUZ SALDARRIAGA 7410 SW 159 TERRACE PALMETTO BAY, FL 33157

SUBJECT: PENAGOS PROPERTIES, LLC

Ref. Number: L10000118101

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Please choose ONLY (1) individual to become the registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Silas Regulatory Specialist II

Letter Number: 121A00030759

### **COVER LETTER**

TO:

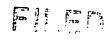
Tallahassee, FL 32314

TO: Registration S Division of Co			
	S PROPERTIES LLC		
SUBJECT:	Name of Lim	ited Liability Company	····
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	MARILUZ SALDARRIA	GA	
	·	Name of Person	
		Firm/Company	
	7410 SW 159 TERRACE		
	PALMETTO BAY, FL. 33	Address	
	ljsbusiness@hotmail.com E-mail address: (	City/State and Zip Code to be used for future annual report noti	fication)
For further information	concerning this matter, please ca	all:	
LUIS SALDARRIAGA	<b>\</b>	786 281-3316	
Name	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for:	the following amount:		
2 \$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 Addre Registration		Street Address: Registration Sec	ction
Division of C	Corporations	Division of Cor	porations
P.O. Box 63	<i>21</i>	The Centre of T	arranassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2022 JAN 10 AM 11: 05

PENAGOS PROPERTIES, LLC

The Articles of Organization for this Limited L	iability Company	were filed on 1	SOVEMBER 12 2010	and assigned
Florida document number L10000118101	·			
This amendment is submitted to amend the follo	owing:			
A. If amending name, enter the new name of	r∕the limited liab	flity company h	iere:	
The new name must be distinguishable and contain the w	ords "Limited Liabil	ity Company, the	designation LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applic	able:			1 1 /
(Principal office hiddress MUST BE A STREE	TADDRESS)			
Enter new mailing address, if applicable:		PENAGOS PI	ROPERTIES LLC	
(Mailing address MAY BE A POST OFFICE I	<u>BOX)</u>	7410 SW 159 TERRACE		
		PALMETTO B	AY, FL 33157	
B. If amending the registered agent and/or reagent and/or the new registered office addres  Name of New Registered Agent:	s here:		records, enter the na	
New Registered Office Address:	7410 SW 159 TI	ERRACE	_	
- State of the sta	Enter Florida street address			
	PALMETTO BAY		. Florida <sup>3</sup>	3157 Zip Code
		City		Zip Code
New Registered Agent's Signature, if changing R	egistered Agent:			
hereby accept the appointment as registered provisions of all statutes relative to the propertice of the propertice of the obligations of my position as registive in the reging filed to merely reflect a change in the recompany has been notified in writing of this company has been notified in writing the company has been notified in the company has been	r and complete prered agent as pregistered office (	performance of rovided for in C	'my duties, and Lam Thanter 605   F.S. Or	familiar with and

If Changing Registered Agent, Signature of New Registered Age

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
MGR	MARILUZ SALDARRIAGA	7410 SE 159 TERRACE	T Add
		PALMETTO BAY, FL. 33157	□Remove
MCD		455 GOD 14 W. W. T	□Change
MGR	LUIS J. SALDARRIAGA J.	455 CORAL WAY A-7	<u></u> ✓ Add
		CORAL GABLES, FL, 33134	□Remove
			□Change
			□Adđ
			🗆 Remove
<del></del>			□Add
			□Remove
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			[F]Change

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Note:	tive date, if other than the date of filing:
the reco	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 iled.
Dated	December 02 2021. If rent Comay.
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00