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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
<u>_</u>
PICK-UP WAIT MAIL
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COVER LETTER

	gistration Sect vision of Corp			
SUBJECT:	Property 263	LLLC		
SOBST.C.T.		Name of Lim	ited Liability Company	
The enclose	d Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return	n all correspon	Jence concerning this matter	to the following:	
		Alex Montero		
			Name of Person	
			Firm/Company	
		10521 SW 140 Street		
			Address	
		Miami, FL 33476		
		umontero47'à bellsouth.net	City/State and Zip Code	
		E-mail address: (t	o be used for future annual report	notification)
For further i	nformation con	eerning this matter, please ca	d:	
·	Name of I	Winder	at (<u>30</u> 5) Area Code Day	466 - 6274 time Telephone Number
Enclosed is	a check for the	following amount:		
■ \$25.001	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 enclose

MAILING ADDRESS:

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

Property 2631 LLC		
(<u>Name of the Limited Liability Cor</u> (A Florida Limit	npany as it now appears on our records ed Liability Company)	<u></u>)
The Articles of Organization for this Limited Liability Compared Plorida document number	any were filed on	and assigned
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited li	iability company here:	
he new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC"	" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS,		
nter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)		FILE 19 APR 18 AH SEURETARY OF LLAHASSEELT
3. If amending the registered agent and/or registered egistered agent and/or the new registered office address b		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	City Flo	orida 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. Thereby 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, 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	Alex Montero	10521 SW 140 Street, Miami, FL 33176	Add			
			Remove			
			⊟ Change			
	Dayanara Montero	10521 SW 140 Street, Miami, FL 33176				
			■ Remove			
			Change			
			AHASSEF. CO			
	·		AH QUE 27 AND A DAID A			
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fective date, if other than t n effective date is listed, the date r ote: If the date inserted in this cument's effective date on the	nust be specific block does no	and cannot be prior of meet the applic	cable statutory	gor more than 90 filing requirer	(optiona days after fili pents, this da	ng.) Purs	uant to 6 101 be 1i	05.020 sted a
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record specifies a delay The 90th day after the r	ed effective ecord is file	e date, but no ed.	ot an effect	ive time, at	12:01 a.m	ı. on ti	he ear	lier (
ted April 12		2019	·					
				i	ier			

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Typed or printed name of signee

Filing Fee: \$25.00