L13000065476

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
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2018 NOV 20 PM 1: 20 SECRETARY OF STATE

C. GOLDEN DEC -1 2018

COVER LETTER

	Registration Sec Division of Corp			
aug inc		O PLAZA LLC		
SUBJEC	:I:	Name of Lim	ited Liability Company	<u> </u>
The encl	osed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspor	ndence concerning this matter	to the following:	
		Kevin F. Jursinski, Esq.		
			Name of Person	
		Kevin F. Jursinski, P.A.		
		<u> </u>	Firm/Company	
		15701 S. Tamiami Trail		
			Address	- · · - · · · · · · · · · · · · · · · ·
		Fort Myers, FL 33908		
		Pascal Col	City/State and Zip Code Struction (0) (a) G to be used for future annual report notific	imail.com
For furth	er information co	oncerning this matter, please co	all:	
Kevin F.	Jursinski		at () 337-1147 Area Code Daytime T	
	Name of	Person	Area Code Daytime	Felephone Number
Enclosed	is a check for the	e following amount:		
\$ 25.0	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:

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

FILED

DEL PRADO PLAZA LLC

2018 NOV 20 PM 1: 20

(Same of the Limited	Liability Compa (Florida Limited	ny as it now appears on c Liability Company)	ur records) CRITARY OF S TALLAHASSEE.	TATE
The Articles of Organization for this Limited Liability Florida document number L13000065476				
This amendment is submitted to amend the follow A. If amending name, enter the new name of t		ility company here:		
The new name must be distinguishable and contain the wor	ds "Limited Liabi	lity Company," the designa	tion "LLC" or the abbreviation "L.l	C."
Enter new principal offices address, if applical	ole:	1118 SE 12th Avenue	e, Unit #1	
(Principal office address MUST BE A STREET		Cape Coral, FL 339	90	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>ox)</u>	1118 SE 12th Avenue Cape Coral, FL 339		
B. If amending the registered agent and/or registered agent and/or the new registered offi		<u>e</u> :	records, enter the name of	of the new
Name of New Registered Agent:				
New Registered Office Address:	1118 SE 12th A	Avenue, Unit #1 Enter Florida sti	eet address	
	Cape Coral		Florida 33990 Zip Code	
New Registered Agent's Signature, if changing Re	gistered Agent:		Zip Code	
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as regist being filed to merely reflect a change in the recompany has been notified in writing of this co	agent and agr and complete ered agent as p gistered office	ee to act in this capa performance of my a provided for in Chapa	luties, and I am familiar with er 605, F.S. Or, if this docu	h and ment is

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>	<u>Address</u>	Type of Action
MGR Bernie Exposito	Bernie Exposito		Add
			Remove
			Change
			□ Remove
			Change
			Add
			□ Remove
			□ Change
			_ □ Add
			□ Remove
			□ Change
			Add
			☐ Remove
			Change
			Remove
			Change

Ramo	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	ive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated	Nov. 15 . 2018.
	Signature of a member or authorized representative of a member
	Eusebio Pascual
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00