

Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

L1300019808

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To:  
 Division of Corporations  
 Fax Number : (850)617-6383

From:  
 Account Name : PAGIO'S & ASSOCIATES, LLC  
 Account Number : I2010000043  
 Phone : (305)397-8553  
 Fax Number : (305)397-8521

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: silvia.dimarco00@icloud.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**  
**ANAGABAND 8430 LLC**

Certificate of Status	0
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RECEIVED

2023 APR 28 AM 10:53

DIVISION OF CORPORATIONS  
 TALLAHASSEE, FLORIDA

2023 APR 28 PM 4:05

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ANAGABAND 8430 LLC  
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:

SILVIA DI MARCO  
Name of Person  
ANAGABAND 8430 LLC  
Firm/Company  
500 Bayview Dr. Apt 524  
Address  
Sunny Isles Beach, FL 33160  
City/State and Zip Code  
silviadimarco00@icloud.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SILVIA DI MARCO at (+54) 91161310814  
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

ANAGABAND 8430 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 03/23/2013 and assigned  
Florida document number L13000119808

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:

500 Bayview Dr.

(Principal office address MUST BE A STREET ADDRESS)

Apt 524

Sunny Isles Beach, FL 33160

Enter new mailing address, if applicable:

500 Bayview Dr.

(Mailing address MAY BE A POST OFFICE BOX)

Apt 524

Sunny Isles Beach, FL 33160

**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:

PAGIO'S & ASSOCIATES II, LLC

New Registered Office Address:

17100 Collins Ave, Ste 209

Enter Florida street address

Sunny Isles Beach

Florida

33160

City

Zip Code

2023 FEB 28 PM 4:05

**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

Apr. 27. 2023 6:15PM

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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>	<u>Type of Action</u>
AMBR	DI MARCO, SILVIA	500 Bayview Dr.	<input checked="" type="checkbox"/> Add
		Apt 524	<input type="checkbox"/> Remove
		Sunny Isles Beach, FL 33160	<input type="checkbox"/> Change
MGR	DI MARCO, SILVIA	500 Bayview dr 524	<input type="checkbox"/> Add
		Sunny Isles, FL 33160	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Kloosterboer, Juan Pedro	500 Bayview dr 524	<input type="checkbox"/> Add
		Sunny Isles, FL 33160	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

