## L14000045117

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
, <i>,</i> , , , , ,
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entity Name)
(Document Number)
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Special Instructions to Filing Officer:

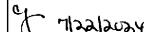
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## **COVER LETTER**

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

CHD IECT.	Downtown	Doral Office LLC		
SUBJECT:	-	Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub	-	
	- 1	Oscar Gastaudo		
			Name of Person	
		Downtonw Doral Office L	LC	
			Firm/Company	
		7950 NW 53 St Ste 118		
			Address	
		Miami Fl 33166		
			City/State and Zip Code	
		oscar@gastaudo.com  E-mail address: (	to be used for future annual report noti	fication)
For further is	nformation c	oncerning this matter, please ca	all:	
Oscar Gastai	udo		786 515-8229	
	Name o	f Person	at () Area Code Daytim	e Telephone Number
Enclosed is a	check for th	ne following amount:		
■ \$25.00 F	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)
	iling Addres gistration S		Street Address: Registration Sec	ction
Div	ision of C	orporations	Division of Cor	porations
P.C	D. Box 632	/	The Centre of T	allahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

5

Downtow	~ Dura	1 Office		ZUZ4,"" 11 FT St 2
( <u>Name of the Limited</u> (A	Liability Compai Florida Limited L	ny as it now appears on o iability Company)	ur records.)	
The Articles of Organization for this Limited Liab	oility Company	were filed on <u>03</u>	118/2014	and assigned
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t	<u>he limited liabi</u>	lity company here:		
The new name must be distinguishable and contain the wor	ds "Limited Liabil	ity Company," the designa	tion "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicat (Principal office address MUST BE A STREET				T 5+e 118
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>0x)</u>	7950 nu	53 S Fn 33	T Ste 118
B. If amending the registered agent and/or reg agent and/or the new registered office address		ddress on our record	ls, enter the nan	ne of the new registered
Name of New Registered Agent:	Oscar	HUSTAU NW 33.	sdo, f	P.A
New Registered Office Address:	7950	nw 33.	St 5tc	. 118
		Enter Florida str  City	eer aaar ess	
		Cuj		Ziji Oilee

## 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

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
A <u>MBR</u>	OSCAL GASTANDO	7950 nw 53 St #118	i\Add
	as two tee of The Oscar Gaston	7950 nw 53 St #118 ado Miani fi 33166	🗀 Remove
	MST DUICHAIDES	→ C	□Change
			□Add
			□Remove
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fective date, if oti	ner than the date of filing: (06 [13] 202 (optional)
n effective date is liste	d, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (
cument's effective	rted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the date on the Department of State's records.
cord specifies a de	layed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
is filed.	
1ed 06/13	
ted	. 2024.
	$\setminus V$
<del></del> -	Signature of a member or authorized representative of a member
. 7 ~	V /
<u> </u>	Typed or printed name of signee GUSTAUDO TOUST DA
	gustado Trust aa
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Filing Fee: \$25.00