

24000086755

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

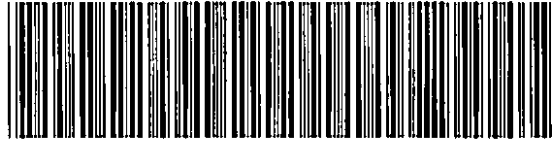
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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18 AUG -9 AM 7:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 30, 2018

MARIA DEL DAGO
1870 SW 5TH AVE
MIAMI, FL 33129

SUBJECT: 1821-808 VENTURE, LLC
Ref. Number: L14000086755

We have received your document for 1821-808 VENTURE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons
Regulatory Specialist III

Letter Number: 718A00015672



REC-11
2018 AUG -9 PM 1:40
STATE OF FLORIDA
DIVISION OF CORPORATIONS

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

1821-808 VENTURE, 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 MAY 29, 2014 and assigned
Florida document number L14000086755

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:

(Principal office address MUST BE A STREET ADDRESS)

1870 SW 5th AVENUE

MIAMI, FL 33129

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1870 SW 5th AVENUE

MIAMI, FL 33129

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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: MARIA DEL DAGO

New Registered Office Address: 1870 SW 5th AVENUE

Enter Florida street address

MIAMI, Florida 33129

City

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, 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>	<u>Address</u>	<u>Type of Action</u>
AMBR	PATTIE CHILDRESS	13810 COUNTY ROAD 185	<input type="checkbox"/> Add
		ALVIN, TX 77511	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	MARIA DEL DAGO	1870 SW 5th AVENUE	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33129	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record 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 record is filed.

Dated

July 17, 2018

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

MARIA DEL DAGO

Typed or printed name of signee