

7/15/2020

Division of Corporations

L140000165198

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H20000225223 3)))



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

From: Account Name : LAW OFFICES TONY PORNPRIYA
Account Number : 120010000164
Phone : (305)893-8989
Fax Number : (305)891-7717

2020 JUL 15 11:53:33

2020 JUL 15 PM 3:28

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

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
MIAREM LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Amend

JUL 20 2020

I ALBRITTON

COVER LETTER

TO: **(((H20000225223 3)))**
Registration Section
Division of Corporations

SUBJECT: **MIAREM 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:

MICHAEL MCAAR
Name of Person
MIAREM LLC
Firm/Company
PO BOX 415485
Address
MIAMI BEACH FL 33141
City/State and Zip Code
businessfinance2011@live.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Mcaar at (**786**) **449-6455**
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

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FILED 2020 JUL 15 PM 3:28

MIAREM 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 10/23/2014 and assigned Florida document number L14000165198

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)

MICHAEL MCAAR 1550 NE 105 STREET MIAMI SHORES, FL 33138

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P O BOX 415485 MIAMI BEACH FL 33141

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: MICHAEL MCAAR

New Registered Office Address: 1550 NE 105 STREET Enter Florida street address

MIAMI SHORES Florida 33138 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

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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:

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MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	ELIAS MAAKAR HERRO	1550 NE 105 STREET	<input type="checkbox"/> Add
		MIAMI SHORES FL 33138	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	ZEINA EL-OSTA	1550 NE 105 STREET	<input type="checkbox"/> Add
		MIAMI SHORES FL 33138	<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"/> Remove
			<input type="checkbox"/> Change

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