## L14000185417

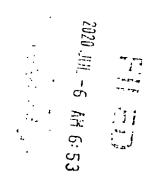
(Red	questor's Name)	·
(Add	dress)	·
(Add	dress)	
·		
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	

Office Use Only



300347272943

07/08/20--01015--010 \*\*55.00



AUG 1 7 2020 S. YOUNG

## **COVER LETTER**

Division of Co	rporations		
SUBJECT: U	ban Village at Name of Limite	t 5th Ave, 2 ed Liability Company	<u> 2C</u>
The enclosed Articles of	Amendment and fee(s) are subm	itted for filing.	
Please return all correspo	ondence concerning this matter to	the following:	
		hael Boorom Name of Person	
	Urbay	Village at 5	th Ave
	3455	NE 5th Aug	e, # 6
	- 4 4 4	and Park, Flo City/State and Zip Code	
	E-mail address: (to	be used for future annual report not	COM (fication)
For further information c	oncerning this matter, please call	:	
Michael 1	BOOKOM F Person	at ( <u>954</u> ) <u>(eO 9</u> Area Code Daytim	- 9479 ne Telephone Number
Enclosed is a check for the	he 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)

TO: Registration Section

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

707

τ.	)r	- m
(Name of the Limited Liability Company  The Articles of Organization for this Limited Liability Company	any as it now appears on our Liability Company)	1200 = = = = = = = = = = = = = = = = = =
Florida document number <u>L/4000/854/7</u>	were filed on	and assigned $\omega$
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	hity Company," the designation	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	<del></del>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. Box Fort Lauder	39852 Jule, F/orida 33339
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records,	enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street	address
		Florida
	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 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
Mar	Fernando Borge	3351 North Andrew Ave	o ⊡Add
		Oakland Park, FL	<b>X</b> Remove
		33309	DChange
Mar	Michael Boorom	3455 NE 5th Ave, #4	<b>X</b> Add
		Oakland Park, Florida	□Remove
		33334	□Change
Mar	Ramy Boorom	3455 NE 5th Ave, #4	□Add
-	1	Ogkland Park, Florida	□Remove
		33334	SChange
			🗆 Add
			□Remove
			□Change
			🗆 Add
			□Remove
			[] Change
		- <u>-</u>	□ Add
		<del></del>	□Remove
			ElChanga

	<del></del>
(If an el Note:	tive date, if other than the date of filing:
he reco	ord 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 filed.
	May 20th 2020
Dated	Minhal France -
Datec	Signature of a member or authorized representative of a member

Filing Fee: \$25.00