

L14000185417

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

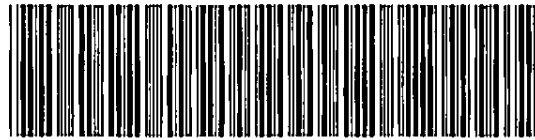
(Business Entity Name)

(Document Number)

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2020 JUL -6 AM 6:53

AUG 17 2020
S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Urban Village at 5th Ave, 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 Boorum
Name of Person
Urban Village at 5th Ave
Firm/Company
3455 NE 5th Ave, #6
Address
Oakland Park, Florida 33334
City/State and Zip Code
Mlboorum@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Boorum at (954) 609-9479
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

2020 JUL -8 PM 6:53
and assigned

(Name of the Limited Liability Company as it now appears on our records.
(A Florida Limited Liability Company))

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>
<u>Mgr</u>	<u>Fernando Borge</u>	<u>3351 North Andrews Ave</u>	<input type="checkbox"/> Add
		<u>Oakland Park, FL</u>	<input checked="" type="checkbox"/> Remove
		<u>33309</u>	<input type="checkbox"/> Change
<u>Mgr</u>	<u>Michael Boorum</u>	<u>3455 NE 5th Ave, #6</u>	<input checked="" type="checkbox"/> Add
		<u>Oakland Park, Florida</u>	<input type="checkbox"/> Remove
		<u>33334</u>	<input type="checkbox"/> Change
<u>Mgr</u>	<u>Ramy Boorum</u>	<u>3455 NE 5th Ave, #6</u>	<input type="checkbox"/> Add
		<u>Oakland Park, Florida</u>	<input type="checkbox"/> Remove
		<u>33334</u>	<input checked="" type="checkbox"/> Change
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Add
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Remove
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Change
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Add
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Remove
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Change
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Add
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[illegible]

05/20/2020

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated May 20th 2020

Michael Brown

Michael Boorum
Typed or printed name of signer

Filing Fee: \$25.00