

L15000039804

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

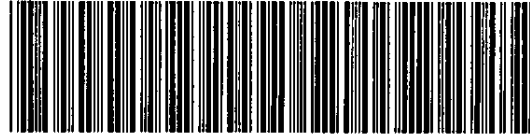
(Business Entity Name)

(Document Number)

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 APR 10 PM 1:00

C.L.
4-24-15

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DOUGLAS PROJECT 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:

RICARDO RIERA

Name of Person

Firm/Company

4016 SW 132 AVE

Address

DAVIE, FL 33330

City/State and Zip Code

RICARDO.RIERA1@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RICARDO RIERA

786

2858685

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**TO
ARTICLES OF ORGANIZATION
OF**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

15 APR 10 PM 1:00

DOUGLAS PROJECT 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 03/04/2015 and assigned
Florida document number L15000039804.

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 end with 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)

3470 NW 82ND AVENUE STE 790

DORAL FL 33122

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3470 NW 82ND AVENUE STE 790

DORAL FL 33122

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:

JORGE NIEVES

New Registered Office Address:

3470 NW 82ND AVENUE STE 790

Enter Florida street address

DORAL

Florida

33122

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

Authorized Member 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>
MGR	JORGE NIEVES	3470 NW 82ND AVENUE STE 790	<input checked="" type="checkbox"/> Add
		DORAL FL 33122	<input type="checkbox"/> Remove
MGR	GERMAN MORALES	3470 NW 82ND AVENUE STE 790	<input checked="" type="checkbox"/> Add
		DORAL FL 33122	<input type="checkbox"/> Remove
MGR	MANUEL VEGA	3470 NW 82ND AVENUE STE 790	<input checked="" type="checkbox"/> Add
		DORAL FL 33122	<input type="checkbox"/> Remove
MRG	RICARDO RIERA	4016 SW 132 AVE	<input type="checkbox"/> Add
		DAVIE FL 33330	<input checked="" type="checkbox"/> Remove
MGR	RICARDO RIERA	3470 NW 82ND AVENUE STE 790	<input checked="" type="checkbox"/> Add
		DORAL FL 33122	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

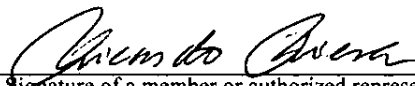
15 APR 10 PM 1:00

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

APRIL 06, 2015

Dated _____, _____.



Signature of a member or authorized representative of a member



Typed or printed name of signee