

4/3/24, 3:41 PM

**L1500071202**  
Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
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From: Account Name : LEOPOLD KORN & LEOPOLD, P.A.  
Account Number : 120010000025  
Phone : (786)899-2235  
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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
DEPARTAMENTO 1004 LLC

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2024 APR -3 AM 9:55

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APR 04 2024

T. LEMIEUX

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

DEPARTAMENTO 1004 LLC

*(Name of the Limited Liability Company as it now appears on our records,  
or Florida Limited Liability Company)*

The Articles of Organization for this Limited Liability Company were filed on 04/22/2015 and assigned Florida document number L15000071208

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 distinct, suitable and contain the words "Limited Liability Company," the designation "LLC," or the abbreviation "L.L.C."*

Enter new principal offices address, if applicable:

4000 Williams Island Blvd.

*(Principal office address MUST BE A STREET ADDRESS)*

Unit 1803

Aventura, FL 33160

Enter new mailing address, if applicable:

4000 Williams Island Blvd.

*(Mailing address MAYBE A POST OFFICE BOX)*

Unit 1803

Aventura, FL 33160

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:

New Registered Office Address:

*(Must be 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 Changing Registered Agent, Signature of New Registered Agent

2024 APR 23 AM 9:56  
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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:

MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Miguel Venguer	18975 Collins Avenue, #1004	<input type="checkbox"/> Add
		Aventura, FL 33180	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Ruth Olmos Lau	4000 Williams Island Blvd., #1803	<input checked="" type="checkbox"/> Add
		Aventura, FL 33160	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

