

L15000140085

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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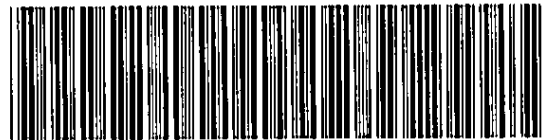
(Business Entity Name)

(Document Number)

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SALT LAKE CITY

D. BRUCE
JUN 04 2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MILLER WEST HOLDINGS, 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:

PAUL LABINER, ESQ.

Name of Person

LAW OFFICE OF PAUL LABINER

Firm/Company

5499 NO FEDERAL HWY., SUITE K

Address

BOCA RATON, FLORIDA 33437

City/State and Zip Code

PAUL@PLABINERESQ.COM

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

For further information concerning this matter, please call:

PAUL LABINER

561 998-2362
at ()

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

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2021 APR 19 AM 7:13
TALLAHASSEE, FL

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

MILLER WEST HOLDINGS, 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 August 19, 2015 and assigned Florida document number L15000140085.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

BILLY J. RADCLIFFE

New Registered Office Address:

460 NW 124th Avenue

Enter Florida street address

Miami

Florida 33182

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

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>
AMBR	NERCY RADCLIFFE	10250 SW 56 ST, Suite D-103	<input type="checkbox"/> Add
		MIAMI, FL 33165	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	NBCKN HOLDING COMPANY	10250 SW 56 ST, Suite D-103	<input type="checkbox"/> Add
		MIAMI, FLORIDA 33165	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	BNCKN HOLDING COMPANY	10250 SW 56 ST, Suite D-103	<input checked="" type="checkbox"/> Add
		MIAMI, FLORIDA 33165	<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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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 April 8, 2021

Signature of a member or authorized representative of a member

BILLY J. RADCLIFFE

Typed or printed name of signee

Filing Fee: \$25.00