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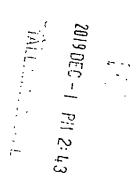
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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November 7, 2019

GEORGE PINZON 1331 BRICKELL BAY DR #3809 MIAMI, FL 33131

SUBJECT: CORPOEXTRA LLC Ref. Number: L15000141402

We have received your document for CORPOEXTRA LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Catherine M Wood Regulatory Specialist II

Letter Number: 719A00023108

SOLODEC - L AMILIST

www.sunbiz.org

COVER LETTER

то:	Registration Se Division of Cor			
cinic		KTRA LLC		
SUBJE	UI:	Name of Lim	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		GEORGE PINZON		
			Name of Person	
		1331 BRICKELL BAY DI	Firm/Company R #3809	
			Address	.
		MIAMI, FL 33131		
		_ _	City/State and Zip Code	
		gpinzon@corproexta.com		
		E-mail address: (to be used for future annual report notif	ication)
For furt	her information co	oncerning this matter, please ca	all:	
GEOR	GE PINZON		at ()	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclose	d is a check for th	ne 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:

TO:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CORPOEXTRA LLC					
(Name of the Limite	d Liability Compa A Florida Limited	iny as it now appears on our records.) Liability Company)			
he Articles of Organization for this Limited Lia lorida document number L15000141402	bility Company	were filed on		and ass	igned
his amendment is submitted to amend the follow	wing:				
. If amending name, enter the new name of	the limited liab	oility company here:			
he new name must be distinguishable and contain the wo	rds "Limited Light	lity Company "the designation "I.I.C" or th	e abbrev	riation "l	
nter new principal offices address, if applica		my company, the designation liber of the	ic acorev	iation L.	 .
Principal office address MUST BE A STREET		1331 BRICKELL BAY DR #3809			
		MIAMI, FL 33131	75.	2019	-
			į.	019 DEC	42 , ť
nter new mailing address, if applicable:			<u>:</u>		٠.
Agiling address MAY BE A POST OFFICE B	ox)	1331 BRICKELL BAY DR #3809	*.*	P	
		MIAMI, FL 33131	:	Ÿ	
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. If amending the registered agent and/o egistered agent and/or the new registered off			ter the	name	of the n
Eistered agent and or the new registered ou	ice address her	<u>c</u> .			
Name of New Registered Agent:					
New Registered Office Address:	1331 BRICKE	LL BAY DR #3809			
		Enter Florida street address			
	MIAMI	, Florida	33131		
		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>	Address	Type of Action
			Remove
			Change
			☐ Remove
			Change
			□ Remove
			Change
			
			Remove
			□ Change
			Add
			□ Change
			Remove
			Change

1.	331 BRICKELL BAY DR #3809
	11AMI, FL 33131
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an effe lote: I	ve date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
ated _	10-22, 2019 ED
	Signature of a member or authorized representative of a member
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00