# L15000 198 244

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone	· #)
PICK-UP WAIT	MAIL
(Business Entity Nam	ne)
(Document Number)	
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JONES OF CONTRACTOR

### **COVER LETTER**

Division of Cor	porations	Rosch		
SUBJECT:	(00)	M Beach 2502 ited Liability Company	LLC	
	Name of Lim	ned Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
		Name of Person		
	Perez-	- Mena d Cons	Laloz, LLC	
	6)6	on Bird A	nad	
		Address		
	Mia	City/State and Zip Code	33155	
	•	City/State and Zip Code	)	
	E-mail address:	to be used for future annual report noti	MG I GW. Wm	et Sijak
For further information c	oncerning this matter, please ca	all:		
	Sagne	$\underbrace{\frac{305}{\text{Area Code}}}_{\text{At Partial Daytim}} \underbrace{\frac{436}{5}}_{\text{Daytim}}$	,-6016	19 835 15 18 2:
Name o	f Person	Area Code Daytim	e Telephone Number	_
Enclosed is a check for the	ne following amount:			30
\$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 Stat Certified Copy (additional copy is en	tus &

#### MAILING ADDRESS:

TO:

**Registration Section** 

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 AMENDMENT TO ARTICLES OF ORGANIZATION OF

Warbour N	MI Beach 2502 LLC
( <u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our records.) nited Liability Company)
The Articles of Organization for this Limited Liability Comp.	pany were filed on 11/34/15 and assigned 244
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 I	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	<u>S)</u>
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	<u> </u>
	<b>立 当者</b>
B. If amending the registered agent and/or registere registered agent and/or the new registered office address	ed office address on our records, enter the name of the shere:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter 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 a 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 ad or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Perla Guerra	101 Sunnise Drive	,
		Key Biscayne FL 331	□ Remove
		Key Biscayne FL 331	식우 다 Change
•			□ Remove
			Change
			Remove
			Change
			□ Add
			□ Remove
			Change
			□ Add
			Remove
			Change
			□ Add
			□ Remove
			_□ Change

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(If an effective Note: I	te 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 the day after the record is filed. $\bigwedge$
Dated _	Hugust 13 2019
Dated _	$A \cdot A \wedge A$
	Signature of a member or authorized representative of a member  Mehael OUNZAlaz CUNSEL For  Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00