

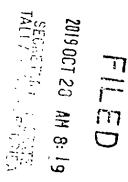
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## **COVER LETTER**

Div	ision of Cor	porations		
SUBJECT:		OTHERS LLC		
JOBO DC 1.		Name of Lim	nited Liability Company	
The enclosed	l Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Hotto M Avila Reyes		
			Name of Person	<del>-</del> -
		MIAMI BROTHERS LLC	<del>;</del>	
			Firm/Company	
		13250 SW 46th St		
			Address	<del></del>
		Miami FL 33175		
		miamibrothersllc@hotmail.	City/State and Zip Code com	<del></del> -
		E-mail address: (	to be used for future annual report notif	ication)
For further in	nformation co	oncerning this matter, please ca	all:	
Hotto M Avi	ila Reyes		305 508 0428 at ()	
	Name of	f Person	Area Code Daytime	Telephone Number
Enclosed is a	check for th	e following amount:		
□ \$25.00 F	iling Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

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

# ARTICLES OF AMENDMENT TOARTICLES OF ORGANIZATION OF

MIAMI BROTHERS 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  $\frac{01/20/2016}{1}$ and assigned Florida document number L16000013406 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." 13250 SW 46th St Enter new principal offices address, if applicable: Miami FL 33175 (Principal office address MUST BE A STREET ADDRESS) 13250 SW 46th St Enter new mailing address, if applicable: Miami FL 33175 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the registered agent and/or the new registered office address here: Hotto M Avila Reves Name of New Registered Agent: 13250 SW 46th St New Registered Office Address: Enter Florida street address Miami Florida

## 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.

City

Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
AMBR	Gissela Arguijo-Luna	13250 SW 46th St	
———			
		Miami FL 33175	
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			□ Change
			□ Add
			Remove
		-	Change
			П.
			□ Remove
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. Effect	tive date, if other than th	10/24/2019 ne date of filing:	(optional) iling or more than 90 days after filing.) Pursuant to 605.0207 (3
Note:	If the date inserted in this	ust be specific and cannot be prior to date of fi block does not meet the applicable statut Department of State's records.	iling or more than 90 days after filing.) Pursuant to 605.0207 (3 ory filing requirements, this date will not be listed as the
	cord specifies a delayers 90th day after the re		ective time, at 12:01 a.m. on the earlier of:
Dated	October 24	2019	
		11892	
	Apr-9386	Signature of a member or authorized repre	sentative of a member

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00