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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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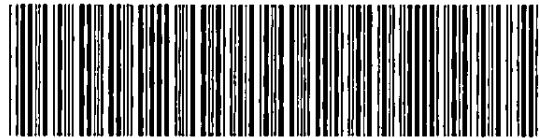
(Business Entity Name)

(Document Number)

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09/09/24--01022--003 **25.00

FILED
SEP 9 2024
TAMPA, FL
CLERK OF DISTRICT COURT

S. HUNT

09/09/24



Mendez & Mendez
LAW OFFICES

7400 SW 57 COURT
SUITE 202
SOUTH MIAMI, FLORIDA 33143

LUIS F. MENDEZ (1919-2005)
SERGIO L. MENDEZ
DANIEL J. MENDEZ

TELEPHONE (305) 667-0112
TELECOPIER (305) 667-1134

September 5, 2024

Florida Department of State
Registration Section
2415 N. Monroe Street, Suite 810
Tallahassee, FL 3230

VIA FEDERAL EXEPRESS

Re: Century Midtown Doral LLC

Dear Sirs,

Enclosed please find the completed/signed Articles of Amendment to Articles of Organization of Century Midtown Doral LLC adding a new manager, Carlos Pino as Trustee of Century Midtown Doral LLC, changing the principal/mailling address and the register agent.

Also, enclosed please find our trust account check number 1424 in the amount of \$25.00 representing the filing fee.

Should you have any questions or comments, please do not hesitate to contact me.

Sincerely,

Maggie Almonte
Legal Assistant to
SERGIO L. MENDEZ, ESQ.

SLM:ma
Tracking Number 778402358986

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CENTURY MIDTOWN DORAL 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:

SERGIO L. MENDEZ

Name of Person

LAW OFFICES OF MENDEZ & MENDEZ, P.A.

Firm/Company

7400 SW 57TH CT., SUITE 202

Address

SOUTH MIAMI, FL 33143

City/State and Zip Code

SERGIO@MENDEZANDMENDEZLAW.COM

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

For further information concerning this matter, please call:

SERGIO L. MENDEZ

305 667-0112
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

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

CENTURY MIDTOWN DORAL 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 02/26/2016 and assigned
Florida document number L16000040859.

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)

7400 SW 57th Ct.

Suite 202

South Miami, FL 33143

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

7400 SW 57th Ct.

Suite 202

South Miami, FL 33143

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:

SERGIO L. MENDEZ

New Registered Office Address:

7400 SW 57TH CT., SUITE 202

Enter Florida street address

SOUTH MIAMI

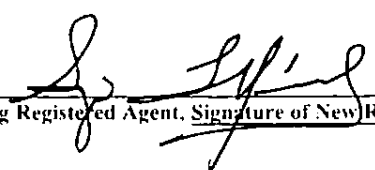
City

Florida 33143

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

[illegible]

21
-9 AM 10:52
STATE
SEE FL

10-9 AM:0:52
OF STATE
SEE FL

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00