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SECRETARY OF STATES

#### Division of Corporations SUBJECT: <u>Helisea</u> <u>Cacedoa</u> <u>Deal</u> <u>Estate</u> <u>Investment</u> Group Name of Limited Liability Company He Helisea entern all correspondence concerning this matter to the following: <u>Helisea</u> <u>Escata</u> <u>Name of Person</u> <u>Helisea</u> <u>Cacedoa</u> <u>Person</u> <u>Helisea</u> <u>Pirm</u> <u>Company</u> <u>Helisea</u> <u>Cacedoa</u> <u>Pirm</u> <u></u>

For further information concerning this matter, please call:

 $\overline{\mathbf{m}}$ 

Melissa Escubar 915-Daytime Telephone Number

Enclosed is a check for the following amount:

Registration Section

TO:

\$25.00 Filing Fee

□ \$30.00 Filing Fee & Certificate of Status □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)

elissa escobar 93 chot

□ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

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MAILING ADDRESS: 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

### **COVER LETTER**

ARTICLES OF A TO ARTICLES OF OF OF	) RGANIZATION
Meliza Escobar Peal (Name of the Limited Liability Company (A Florida Limited Liability	(as it now appears on our records.) billity Company)
The Articles of Organization for this Limited Liability Company w	vere filed on July 5, 2016 and assigned
Florida document number 16000 127145	
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liabili</u> Leidy Melissa ESCUB	AR LLC
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	20200 Ubst Divie Huy
(Principal office address MUST BE A STREET ADDRESS)	Suite 1105A
	Aventura, FT 33180
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Same as above
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here:	ce address on our records, <u>enter the name of the new</u>
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 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, <u>enter the title, name, and address of each person</u> being added <u>or removed from our records</u>:

#### MGR = Manager AMBR = Authorized Member

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- . .

Title	<u>Name</u>	Address	Type of Action
			🗖 Add
			Remove
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**D.** If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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### E. Effective date, if other than the date of filing: \_\_\_\_\_\_(optional) (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) <u>Note:</u> 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.

**مر**ر

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.

Dated October 12, 2016
lever m. Europe
Signature of a member or authorized representative of a member
Leidy melissa Escubar
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

## Electronic Articles of Organization For Florida Limited Liability Company



### **Article I**

The name of the Limited Liability Company is: MELISSA ESCOBAR REAL ESTATE INVESTMENTS GROUP, LLC

# Article II

The street address of the principal office of the Limited Liability Company is: 1200 BRICKELL AVENUE 505 MIAMI, FL. 33131

The mailing address of the Limited Liability Company is: 19030 SW 82 CT CUTLER BAY, FL. 33157

### Article III

Other provisions, if any: REAL ESTATE INVESTMENTS



## Article IV

The name and Florida street address of the registered agent is:

LEIDY M ESCOBAR 1200 BRICKELL AVENUE 505 MIAMI, FL. 33131

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: LEIDY MELISSA ESCOBAR

# Article V

The name and address of person(s) authorized to manage LLC:

Title: MGR LEIDY M ESCOBAR 1200 BRICKELL AVENUE SUITE 505 MIAMI, FL. 33131

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Signature of member or an authorized representative

Electronic Signature: LEIDY MELISSA ESCOBAR

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

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