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SEPARIMENT OF STATE
BYSION OF CORPORATION

TALLAHASSFELFLORING

FEB 1 8 2020 **S. YOUN**G

## **COVER LETTER**

TO: Registration Sec Division of Corp		•	
Lander Asso	ociates LLC		
SUBJECT:	Name of Limit	ed Liability Company	
The enclosed Articles of A	Amendment and fee(s) are subn	nitted for filing.	
Please return all correspon	ndence concerning this matter t	o the following:	
	Jill DiSalvo		
		Name of Person	<del></del>
	DiSalvo & Associates		
		Firm/Company	
	1760 N. Jog Road, Suite 15	50	
		Address	· <del></del> ·-
	West Palm Beach, FL 3341	11	
		City/State and Zip Code	<del> ·</del>
	JDiSalvo@D-acpa.com		
	E-mail address: (1	o be used for future annual report no	ntification)
For further information c	oncerning this matter, please ca	all:	
Jill DiSalvo		561 659-1177 at ()	
Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed is a check for the	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: 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

Lander Associates, 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 7-19-2016 Florida document number \_\_\_\_\_L16000135468 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) 1760 N Jog Road Enter new mailing address, if applicable: Suite 150 (Mailing address MAY BE A POST OFFICE BOX) West Palm Beach, FL 33411 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: DFS Agent LLC Name of New Registered Agent: 1760 N. Jog Road, Suite 150 New Registered Office Address: Enter Florida street address West Palm Beach

## 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>	<u>Address</u>	Type of Action
AMBR	Lemuria Gomez	431 Executive Center Drive Apt 213	Add
		West Palm Beach, FL 33401	Remove
			☐ Change
			DbA
			□ Remove
		☐ Change	
		Add	
		☐ Remove	
			Change
		☐ Add	
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		Remove	
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		Add	
		Remove	
			Change

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). If amending any	other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effective date is Note: If the date i	other than the date of filing:
f the record speci b) The 90th day	fies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: after the record is filed.
Dated	2019 , 12-19-2019 .
	A I
	Signature of a member or authorized representative of a member
	Juan Gomez Lander
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00