

L 16000/166685

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : R&P ACCOUNTING AND TAXES INC
Account Number : I20170000090
Phone : (305)358-1310
Fax Number : (305)503-6701

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: arod8723@gmail.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CHATEAU 2501, LLC**

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2021 FEB 19 AM 6:34

FILED
2021 FEB 19 PM 5:38
TALLAHASSEE, FLORIDA

SAIY
FEB 22 2021

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

CHATEAU 2501 LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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SEC. OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 09/06/2016 and assigned
Florida document number L16000166685

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)

501 NE 31st ST APT 707

MIAMI, FL 33137

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

501 NE 31st ST APT 707

MIAMI, FL 33137

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:

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, 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>	<u>Type of Action</u>
MGR	KAMAL EL-NASHAR	1440 LEE WAGNER BLVD SUITE 200	<input type="checkbox"/> Add
		FORT LAUDERDALE, FL 33315	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Diego Rengifo	501 NE 31st ST APT 707	<input type="checkbox"/> Add
		MIAMI, FL 33137	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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Dated 02/16/2021

Signature of a member or authorized representative of a member:

DIEGO RENGIFO

Typed or printed name of signee