## L16000174398

(Requestor's Name)
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(Business Entity Name)
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SECRETARY OF STATE

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## **COVER LETTER**

Registration Section Division of Corporations

TO:

1159 WES	T 23RD STREET, LLC		
SUBJECT:	Name of Lim	ited Liability Company	<del></del>
	Amendment and fee(s) are sub		
Please return all correspo	ondence concerning this matter	to the following:	
	Pedro Sanchez		
		Name of Person	
	1159 WEST 23RD STREE	ET, LLC	
		Firm/Company	
	45 West 17th Street		
		Address	
	Hialeah, FL 33010		
		City/State and Zip Code	<del></del>
	yogirentals@gmail.com		
	E-mail address: (	to be used for future annual report noti	fication)
For further information of	concerning this matter, please c	all:	
Maritza Hernandez		786 473-0405 at ()	
Name of Person		Area Code Daytim	e Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing 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 Addre Registration Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Se Division of Co The Centre of 7 2415 N. Monro	rporations

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

1159 WEST 23RD STREET, LLC

2020 OCT 20 AM 10: 10

	Hialeah	,	Florida 33010 Zin Code
isew Registered Office Address:		Enter Florida street add	ress
New Registered Office Address:	45 West 17th Street		
Name of New Registered Agent:	Giselle Sanchez		
3. If amending the registered agent and/or gent and/or the new registered office addr		on our records, <u>ent</u>	er the name of the new regis
<u>Mailing address MAY BE A POST OFFICE</u>	<u> </u>		<u> </u>
inter new mailing address, if applicable:			
<u>Principal office address MUST BE A STRE</u>	ET ADDRESS)		
nter new principal offices address, if appl	icable:	<u> </u>	
he new name must be distinguishable and contain the	words "Limited Liability Compa	any," the designation "L	LC" or the abbreviation "L.L.C."
If amending name, enter the new name	of the limited liability com	ipany herg:	
his amendment is submitted to amend the fol	llowing:		
lorida document number L.16000174398	·		
he Articles of Organization for this Limited I	Liability Company were file	ed on <u>9/16/16</u>	and assigned

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	Maritza Hernandez	45 West 17th ST	≣Add
		Hialeah, FL 33010	□Remove
			Change
	<del></del>		
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Effective date, if other than the fan effective date is listed, the date mus Note: If the date inserted in this blodocument's effective date on the Defective date.	t be specific and cannot be prio ock does not meet the appli- epartment of State's records	cable statutory filing requ s.	irements, this date will not	t be listed as t
record specifies a delayed effective d is filed.	e date, but not an effective t	time, at 12:01 a.m. on the	earlier of: (b) The 90th d	lay after the
October 15 Dated	2020			
Dated October 15	;	·	anhar .	
Dated October 15	Signature of a member or auth	orized representative of a m	ember	