## 116000303777

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City,	/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Name	e)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	
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Office Use Only



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2020 OCT 20 AH 10: 21
SECRETARY OF STATE

11/25/20

## **COVER LETTER**

TO: Registration Sc Division of Cor			
	60TH STREET, LLC		
SUBJECT:	Name of Lim	nited Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Pedro Sanchez		
		Name of Person	
	15 WEST 60TH STREET	, LLC	
	<del> </del>	Firm/Company	
	45 West 17th Street		
		Address	
	Hialeah, FL 33010		
		City/State and Zip Code	
	yogirentals@gmail.com	to be used for future annual report noti	faution)
For further information c	oncerning this matter, please c		ncanon)
Maritza Hernandez		786 473-0405	
Name o	f Person	Area Code Daytim	e 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

Street Address: Registration Section Division of Corporations

The Centre of Tallahassee

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

15 WEST 60TH STREET, LLC

company has been notified in writing of this change.

2020 OCT 20 AM 10: 21

(Name of the Limited Liability Compa (A Florida Limited	Liability Company)	reords.) IARY OF STATE
The Articles of Organization for this Limited Liability Company	were filed on October 31.	AHASSEE, FI 2016 and assigned
Florida document number $\frac{1.16000203777}{1.16000203777}$		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity 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)		
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	·
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>c</u>	enter the name of the new register
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street (	uddress
		Florida Zip Code
		Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office	performance of my duti provided for in Chapter	es, and I am familiar with and 605, F.S. Or, if this document is

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>	Address	Type of Action
AMBR	Maritza Hernandez	45 West 17th ST	■Add
		Hialeah, FL 33010	□Remove
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ective date, if other than the	ne date of filing: nust be specific and cannot be prior to	date of filips or more than 90	(optional) days after filing ) Pursuant to 605 020'
e: If the date inserted in this	block does not meet the applicable		
ument's effective date on the	Department of State's records.		
	tive date, but not an effective time	2, at 12:01 a.m. on the earli	ier of: (b) The 90th day after the
cord specifies a delayed effect filed.			
Sfiled.	2020		
filed.	2020	.•	
Sfiled.		.•	

Typed or printed name of signee