16000212043

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COVER LETTER

Division of Corp			
SUBJECT:	Escu	DERO LLC	_
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub	omitted for filing.	
Please return all correspond	dence concerning this matter	to the following:	
	MARIA V	ROPE GUEZ	DE LOS RIOS
		RO LLC	
		Firm/Company	
	1701	NE 115th st	オイイ
		Address	·····
	peiapei	City/State and Zip Code	181
		City/State and Zip Code	-0.1 (200
		HUHOMES CO G	
		•	iomication)
For further information cor	ncerning this matter, please of	:ali:	
Maria V Re Name of I	odn'sue Z	at (404) 6 Area Code Day	43-94-96 time Telephone Number
Enclosed is a check for the	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

ESCUDERD LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) Florida document number <u>L16000212043</u> 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Florida

Zip Code

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
MGR	MARIA V	1701 NE 115th ST	Add
	RODRIGUEZ DE	441	Remove
	LOS RIOS	MIAMI FL, 33181	Change
			□ Add
			Remove
		<u>/</u>	☐ Change
			Rèmove 7
_/		·	Gliange 9
			Remona
		<u>/</u>	Change
/			Add
			Remove
/	/	<u> </u>	Change
			Add
,			Remove
			Change

		·	
	We just need to Add the Person who Registered Asport, to be a MANAGER) is	_
	Registered Agent, to be a MANAGER	as	<u>w</u>
	ADD MANAGÉR.		
	thanks.		<u> </u>
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			605.020
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effect te: If cumen	re date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) In the date inserted in this block does not meet the applicable statutory filing requirements, this date w	ill not be	listed a
effect te: If cumen reco	re date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) If the date inserted in this block does not meet the applicable statutory filing requirements, this date was effective date on the Department of State's records. It is specified a delayed effective date, but not an effective time, at 12:01 a.m. or	ill not be	listed a

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Filing Fee: \$25.00