

L170000 30081

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

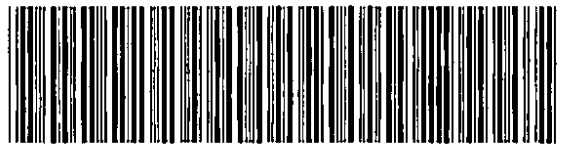
(Business Entity Name)

(Document Number)

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JUL 24 2019  
S. YOUNG

FILED  
19 JUL 22 AM 11:31  
SOUTH FLORIDA  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 10, 2019

JORGE SOSA  
28000 SW 157 AVENUE  
HOMESTEAD, FL 33033

SUBJECT: CHIMI TEAM MIAMI LLC  
Ref. Number: L17000030081

We have received your document for CHIMI TEAM MIAMI LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

YOU SUBMITTED MORE THAN ONE AMENDMENT FORM WHICH ONE DO YOU WANT PROCEDDED

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young  
Regulatory Specialist II

Letter Number: 719A00012887

2019 JUL 22 PM 2:48

RECEIVED

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: CHIMI TEAM MIAMI LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JORGE SOSA

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

28000 SW 157 AVE

\_\_\_\_\_  
Address

HOMESTEAD FL 33033

\_\_\_\_\_  
City/State and Zip Code

SOSAJORGE@GMAIL.COM

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JORGE SOSA

786 259-2239  
at ( )

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime 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**

CHIMI TEAM MIAMI 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 February 07, 2017 and assigned  
Florida document number L17000030081.

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)**

JORGE SOSA

28000 SW 157 Ave

HOMESTEAD, FL 33033

Enter new mailing address, if applicable:

**(Mailing address MAY BE A POST OFFICE BOX)**

JORGE SOSA

28000 SW 157 Ave

HOMESTEAD, FL 33033

**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:

JORGE SOSA

New Registered Office Address:

28000 SW 157 AVE

*Enter Florida street address*

HOMESTEAD

Florida 33033

*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	JONATHAN PAUL HOUDE	28000 SW 157 AVE	<input type="checkbox"/> Add
		HOMESTEAD, FL 33033	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper appears to be a standard notebook page or a sheet of graph paper without grid patterns. The edges of the paper are slightly irregular, suggesting it might be a scan of a physical document. There is no text or other markings on the page.

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

RE TO \_\_\_\_\_ 2019 \_\_\_\_\_

\_\_\_\_\_  
Signature of a member or authorized representative of a member

JORGE SOSA  
\_\_\_\_\_  
Typed or printed name of signee