L17000075155

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cil	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	·
•	,	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



300395493053

NOV 1 4 2022

11/15/22--01003--018 **25.00

SECRETA SCHOOL STATE

COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

	N AT 27TH LLC			
SUBJECT:	Name of Lin	ited Liability Company		
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.		
Please return all corres	pondence concerning this matter	to the following:		
	MARCO DESOUZA			
		Name of Person		
	C/O ALFRED XIQUES			
		Firm/Company		
	5901 SW 74TH STREET	- SUITE 400		
		Address		رن اتاء -
	MIAMI, FL 33143			CRE
		City/State and Zip Code		25
	MARCO100@MSN.COM	to be used for future annual report notif	•	3
For further information	remail address, to concerning this matter, please e		ica(icin)	
MARCO DESOUZA		305 799-8491		(1)
Name	e of Person		: 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 Sta Certified Copy (additional copy is er	tus &
Mailing Addi Registration Division of P.O. Boy 6	n Section Corporations	Street Address: Registration Sec Division of Cor The Centre of T	porations	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ny as it now appears on our records, hability Company))
were filed on 04/05/2017	and assigned
lity company here:	
ity Company," the designation "LLC"	or the abbreviation "L.L.C."
	- 2
	ECR
	LE NOV
<u> </u>	
	To 2
iddress on our records, <u>enter t</u>	he name of the new regist
	
Extens bilanish stand addings	
emier e iorida suvet adaress	
. Flor	rida
	•

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>	Address	Type of Action
MGR	THIAGO PAZINATTO	848 BRICKELL AVENUE SUITE 605 , MIAMI FL	35 □ Add
			≣Remove
			□Change
			□Add
			□Remove
		SECRE TALE	Change
		ALEAN AND AND AND AND AND AND AND AND AND A	Change 2022 10 Add
			Change
		류 	□Add
			□Remove
			□Change
			□Add
		 	□Remove
			□Change
			🗆 Add
			□Remove
			□Change

				
		<u>-</u> .		
		- · · · ·		
			·	
 				
			SEC	207
		•	<u> </u>	2022 NOV
		 	<u>></u>	
			तीर्भ क भारत	PH ;
				ı تخت_
			777	വ
fective date, if other than the date of filing: In effective date is listed, the date must be specific and cannot be prior to ote: If the date inserted in this block does not meet the applicable cument's effective date on the Department of State's records.	date of filing or notes statutory filing	(op note than 90 days a ng requirements.	otional) fter filing.) Purs this date will t	uant to 605, not be liste
ecord specifies a delayed effective date, but not an effective time is filed.	e, at 12.01 a.m.	on the earlier of:	(b) The 900	h day after
acd NOVEMBER 7TH 2022	(Jan	.//		
/	/ 1744.11 111.	//		
Signature of a member of a pictori.	zed representativ	of a member		

Filing Fee: \$25.00