## Division of Corporations Electronic Filing Cover Sheet

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Email	Address				
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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SOUTHERN VILLA CONDOS LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

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Corporate Filing Menu

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MAR 23 2020

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SOUTHERN VILLA CONDOS LLC  (Name of the Limited Liability Com (A Florida Limite	pany 85 it now appears on d Liability Company)	our (records, )
The Articles of Organization for this Limited Liability Compar Florida document number <u>L17000093857</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lis	ability company here:	
SOUTHERN VILLAS CONDOS LLC		
The new name must be distinguishable and contain the words "Limited Lin	bility Company," the design	attion "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)		2020 HAR 20 SECT
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our recor	ds, enter the name of the newwegistere
Name of New Registered Agent:		<b>Q</b> . 3
New Registered Office Address:		
	Enter Florida s	treet address
		Florida
• • • • • • • • • • • • • • • • • • • •	Cay	, Florida Zip Cock
New Registered Agent's Signature, if changing Registered Agen		·

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 fimiliar 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 amending Authorized Person(s) authorized to manage, <u>outer the title, name, and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
AMBR	PATRIZIO DE BRASI	8299 ĆORAL WAY	□Add
		MAIMI, FL 33155	□Remove
			- □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
AMBR	EDUARDO SUAREZ	8299 CORAL WAY	
		MIAMI, FL 33155	□ Remove
		- All Indiana	
******************************			□Add
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