

L17000100992

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

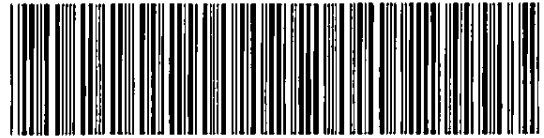
(Business Entity Name)

(Document Number)

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2023 APR -4 PM 3:00  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED

Y. SCOTT  
MAY 20 2023

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Diaz Commercial, PLLC.  
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:

Irving J. Diaz  
Name of Person  
Diacom Real Estate, PLLC.  
Firm/Company  
2200 N. Commerce Parkway, Ste. 200  
Address  
Weston, Florida 33326  
City/State and Zip Code  
irving.diaz@diacom.realestate  
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE  
2023 APR -4 PM 3:00  
**FILED**

For further information concerning this matter, please call:

Irving J. Diaz at (954) 644-8900  
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 Address:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Diaz Commercial, PLLC.

\_\_\_\_\_  
**(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 05/05/2017 and assigned Florida document number L17000100992.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Diacom Real Estate, PLLC.

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)**

6303 Blue Lagoon Dr., Ste. 400

Miami, Florida 33126

**Enter new mailing address, if applicable:**

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

2200 N. Commerce Parkway, Ste. 200

Weston, Florida 33326

2013 APR 14 PM 3:00  
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SOUTH FLORIDA STATE

**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: Irving J. Diaz

New Registered Office Address: 2200 N. Commerce Parkway, Ste. 200

*Enter Florida street address*

Weston

*City*

Florida 33326

*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>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
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_____	_____	_____	<input type="checkbox"/> Remove
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_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change

2023 APR -4 PM 3:00  
STATE OF FLORIDA  
TALLAHASSEE, FL

