## L17000138758

| (Re                     | questor's Name)    |           |
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| (Cit                    | ty/State/Zip/Phone | : #)      |
| PICK-UP                 | ☐ WAIT             | MAIL      |
| (Bu                     | siness Entity Nam  | ne)       |
| (Do                     | ocument Number)    | _         |
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S. WARREN JUL 12 2017

## **COVER LETTER**

|                | istration Sec<br>ision of Corp |   |   |   |
|----------------|--------------------------------|---|---|---|
| SUBJECT:       | 609-5 Euclid                   | LLC   |   |   |
| (COMMITTEE TO  |                                |   | ited Liability Company  |   |
|                |                                | mendment and fee(s) are sub<br>dence concerning this matter |   |   |
|                |                                | Mariene Zapata  |   |   |
|                |                                |   | Name of Person  |   |
|                |                                | Gonzalez & Rodriguez PL                                     |   |   |
|                |                                |   | Firm/Company  |   |
|                |                                | 999 Ponce de Leon Blvd.,                                    | Ste 1135  |   |
|                |                                |   | Address   |   |
|                |                                | Coral Gables FL 33134                                       |   |   |
|                |                                |   | City/State and Zip Code   |   |
|                |                                | housefg@aol.com   | to be used for future annual report notifi-                               |   |
| For further in | formation cor                  | n-man address; to   |   | canon)  |
| Marlene Zapa   | ata                            |   | at (305 Area Code) 461-4880 Daytime                                       |   |
|                | Name of I                      | <sup>3</sup> erson  | Area Code Daytime   | Telephone Number  |
| Enclosed is a  | check for the                  | following amount:   |   |   |
| ■ \$25,00 Fi   | ling Fee                       | □ \$30.00 Filing Fee &<br>Certificate of Status             | □ \$55,00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | ☐ \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

| 609-5 Euclid LLC   |  |  |
|--|--|--|
| ( <u>Name of the Limited Liability C</u><br>(A Florida Lin   | Company as it now appears on our<br>mited Liability Company) | records.)  |
| The Articles of Organization for this Limited Liability Completion of December $\frac{L17000138758}{L17000138758}$ .   | pany were filed on $\frac{06-26-2017}{}$                     | and assigned   |
| This amendment is submitted to amend the following:  |  |  |
| A. If amending name, enter the new name of the limited   | l 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 ADDRES.   | <u></u>  |  |
| Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  |  |  |
| B. If amending the registered agent and/or registered registered agent and/or the new registered office address  |  | ecords, enter the name of the nev                                |
| Name of New Registered Agent:  |  |  |
| Num Danistan J (1967 - A J.L   |  |  |
| New Registered Office Address:   | Enter Florida street   | address  |
|  |  | , Florida  |
|  | Cire   | , Florida<br>Zip Code  |
| New Registered Agent's Signature, if changing Registered Ag  | gent:  |  |
| I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compaccept the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change. | plete performance of my duti<br>t as provided for in Chapter | es, and I am familiar with and 605, F.S. Or, if this document is |

Page 1 of 3

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

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u>       | Address                          | Type of Action  |
|--------------|-------------------|----------------------------------|-----------------|
| MGR          | Horacio V. Pijuan | 536 Euclid Ave #3, Miami Beach F | Add             |
|              |                   |                                  | □ Remove        |
|              |                   |                                  | Change          |
| MGR          | Juan J Rebora     |                                  |                 |
|              |                   | 536 Euclid Ave#3, Miami Beach Fl | <b>∃</b> Remove |
|              |                   |                                  | Change          |
|              |                   |                                  |                 |
|              |                   |                                  | Remove          |
|              |                   |                                  | Change          |
|              |                   |                                  | Add             |
|              |                   |                                  | □ Remove        |
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|              |                   |                                  | 17 Dichange     |
|              |                   |                                  | O Add           |
|              |                   |                                  | S Remove        |
|              |                   |                                  | □ Change        |

| D. If amending any other infor  | mation, enter cl   | nange(s) here:     | (Attach addition                                | al sheets, if neces                                     | sary.)   |                                |
|---|--------------------|--------------------|---|---|--|--------------------------------|
| - · · ;   |                    | <del></del>        |   | <del></del>   |  | <b>–</b> →                     |
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|   |                    | ·                  |   |   |  | <del></del>                    |
| E. Effective date, if other than the an effective date is listed, the date is Note: If the date inserted in this document's effective date on the | s block does not m | icet the applicab  | date of filing or more<br>le statutory filing o | (option<br>than 90 days after fi<br>equirements, this o | ial)<br>ling.) Pursuant to<br>late will not be | o 605,0207 (3<br>Elisted as th |
| f the record specifies a delay<br>b) The 90th day after the r   |                    | ate, but not a     | an effective tim                                | ne, at 12:01 a.   | m. on the e                                    | arlier of:                     |
| Dated July 05.  | ,                  | 2017               |   |   | 17,  |                                |
|   |                    | _/_/               | 4/  |   |  | - '5'                          |
|   | Signature of a n   | nember or authori: | zed representative of                           | a member  |  |                                |
| Humberto L. Rodrigi   | iez, Esq.          | Typylar may 1      | January Caramina                                |   | .,,  | : □<br>-                       |
|   |                    | Typed or printed   | painte of signee                                |   |  | •                              |

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