117000 169426

(Req	uestor's Name)	·
(Ādd	ress)	
(Add	ress)	
(City,	/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Busi	iness Entity Nam	ne)
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Certified Copies	Certificates	of Status
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Special Instructions to Fi	ling Officer:	

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Amend

APR 3 0 2019

I ALBRITTON

COVER LETTER

	istration Sec sion of Corp				
SUBJECT:	PULIDO HOLDINGS 2, LLC				
500,000		Name of Lim	ited Liability Company		
The enclosed	Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspor	ndence concerning this matter	to the following:		
		Heana Noa			
			Name of Person		
		Concorde Land Title Servi	ces. Inc.		
		11111	Firm/Company		
		134 South Dixie Highway,	Suite 100		
			Address	 	
		Hallandale Beach, FL 3300	09		
			City/State and Zip Code		
		inoa@concordelts.com	to be used for future annual report no	illention)	
For further in	formation co	oncerning this matter, please ca	•	inteation	
Heana Noa			305 356-8403 at ()		
	Name of	Person	Area Code Daytii	ne Telephone Number	
Enclosed is a	check for the	e following amount:			
■ \$25.00 Fi	iling Fee	S30.00 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, FI. 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



January 29, 2019

ILEANA NOA CONCORDE LAND TITLE 134 SOUTH DIXIE HWY - STE. 100 HALLANDALE, FL 33009

SUBJECT: PULIDO HOLDINGS 2, LLC

Ref. Number: L17000169426

We have received your document for PULIDO HOLDINGS 2, 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 document must have original signatures.

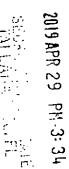
You failed to sign the form.

Mulow 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.

Irene Albritton Regulatory Specialist II

Letter Number: 219A00002088



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

ART	TICLES OF	AMENDMENT	
ARTI		AMENDMENT O DRGANIZATION OF Ny as it now appears on our records.) Liability Company)	
PULIDO HOLDINGS 2, LLC			
(Same of the Limit	(A Florida Limited	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Li	ability Company	were filed on August 8, 2017 and assigned	
Florida document number L17000169426		and doinghed	
This amendment is submitted to amend the follo	owing:		
A. If amending name, <u>enter the new name of</u>	the limited liab	ility company here:	
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applica	able:	134 South Dixie Highway, Suite 100	
Principal office address MUST BE A STREET ADDRESS)		Hallandale Beach, FL 33009	
Inter new mailing address, if applicable:		134 South Dixie Highway, Suite 100	
Mailing address MAY BE A POST OFFICE BOX)		Hallandale Beach, FL 33009	
			
		ffice address on our records, enter the name of the nev	
registered agent and/or the new registered of	<u>lice address her</u>	<u>e</u> :	
N 5N 0 1 1	Heana Noa		
Name of New Registered Agent:			
New Registered Office Address:	134 South Dixi	e Highway, Suite 100	
		Enter Florida street address	
	Hallandale Bea	ch Florida 33009	

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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 Title Name <u>Address</u> Type of Action LUZ ESCOBAR 134 S. Dixie Highway 100 MGR _□ Add Hallandale, FL 33009 Remove ☐ Change Joseph Kodriguez Sousa 1345. Dixie theyman + ☐ Change Carlos Pulido ☐ Change ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove

☐ Change

						
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Note:	If the date inserte		meet the applic	able statutory filing	(optional) re than 90 days after filing, requirements, this date	
		delayed effective the record is filed		t an effective ti	me, at 12:01 a.m.	on the earlier of:
Dated _	June	iary 9	$\frac{2019}{0.0}$	·		
	- V/ /	$-\alpha$	1 Nel			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00