LI7000182507

-	(Requestor's Name)	
 	(Address)	
· · · · · ·	(Address)	
	(City/State/Zip/Phone #)	
PICK-U	JP WAIT MAIL	
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of Status	
Special Instruction	ns to Filing Officer:	
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SECRETARY OF STATE



COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Co	orporations	
Address (Change- Metropolitan Property	Group Florida, LLC
SUBJECT:	Name of Lin	nited Liability Company
The enclosed Articles of	of Amendment and fee(s) are sul	omitted for filing.
Please return all corres	oondence concerning this matter	to the following:
	Johnathan Ibarra-Blackm	пож
		Name of Person
	Astra Property Group	
		Firm/Company
	152 NE 167th St, Suite 40)5
		Address
	Miami FL 33162	
		City/State and Zip Code
	info@astrapg.com	SEC 1724 FF
For further information	E-mail address: concerning this matter, please of	(to be used for future annual report notification)
Johnathan Ibarra-Blaci		City/State and Zip Code (to be used for future annual report notification) rall: at (
Name	of Person	(to be used for future annual report notification) all: 372-1043 Area Code Daytime Telephone Number 777 777 777 777 777 777 777
Enclosed is a check for	the following amount:	
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addr Registration Division of P.O. Box 63	Section Corporations	Street Address: Registration Section Division of Corporations The Centre of Tallahassee

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



June 12, 2024

JOHNATHAN IBARRA-BLACKMOON 152 NE 167TH ST, SUITE 405 MIAMI, FL 33162

SUBJECT: METROPOLITAN PROPERTY GROUP FLORIDA, LLC

Ref. Number: L17000182507

We have received your document for METROPOLITAN PROPERTY GROUP FLORIDA, 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):

Please selest the type of action you are taking with each member.

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.

Morgan E Lovett Regulatory Specialist II

Letter Number: 924A00012786

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Metropolitan Property Group Flori			
(Name of the Limit	ted Liability Compa (A Florida Limited I	iny as it now appears on our Liability Company)	records.)
The Articles of Organization for this Limited L	iability Company	were filed on	8 and assigned
Florida document number L17000182507	<u> </u>		
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liab	ility company here:	
The new name must be distinguishable and contain the w	ords "Limited Liabil	lity Company," the designatio	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		152 NE 167th St, Suite	405
		Miami FL 33162	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		152 NE 167th St, Suite Miami Fl 33162	405 S. E.
B. If amending the registered agent and/or r agent and/or the new registered office addre	egistered office a	address on our records,	enter the name of the new register
			W 2: 45
Name of New Registered Agent:			그
New Registered Office Address:	152 NE 167th S		
		Enter Florida street	address
	Miami		, Florida
		City	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 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
MBR	Goma Investments		
			□Remove
		152 NE 167th St, Suite 405 Miami FL 33162	T Change
MGR	Johnathan Ibarra- Blackmoon		□ Add
			□ Remove
		152 NE 167th St, Suite 405 Miami FL 33162	Change
AMBR	Sami Katri,		□Add
			□Remove
		152 NE 167th St, Suite 405 Miami FL 33162	yaci@e
			JUL 16
			PRemove 2:
			Change
•		·	□ Add
			□Remove
			□Change
			🖸 Add
			□Remove

D. If amendin	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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-		
,		
-		
		
	\$EC	
E. Effective da	ate, if other than the date of filing: 05/15/2024 (optional)	,
Note: If the	date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02027(3) date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the	(b)
documents	effective date on the Department of State's records.	
If the record spec record is filed.	rifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the	
record is rived.		
Dated	05/14, 2024.	
_	Signature of a-member or authorized representative of a member	
	Johnston - Backman.	

E''' E #55.00