To:

18884011914



, Page:3 o	of 6	2024-06-05 17	:43:38 GMT	188840119	14	From: Silvas Financia	Services, LLC
(((1124000197795-3)))		I	COVER LE	FTER			
TO: Registration S Division of Co					٩		`. .
AVENTU	RA CEVI. LLC						
SUBJECT:		Name of Lim	ited Liability Compa	ny			
The enclosed Articles of	f Amendment and	fee(s) are sub	mitted for filing.				
Please return all corresp	undence concerni	ng this matter	to the following:				
	ESTEBAN	CEU					
		<u> </u>	Name of Pers	on	<u> </u>		
	AVENTUR.	A CEVI, LLC					
	<u></u>		Firm/Compa	זי	<u> </u>	, · · · · ·	
	3340 NE 19	OTH STREET	SUITE 405			:,	
			Address				,
	AVENTUR	A, FL 33180					: . 1
	ACCOUNTI	NG2@iSILVA	City/State and Zip SBOX.COM	Cude			
		-	to be used for future	annual report notific	ation)		
For further information (concerning this n	atter, please ca	all [.]				
Name	of Person		at (Area Coe)	Telephone Number		
Name	or retson		Area Coe	те трауние	rerepriore (vulniter		
Enclosed is a check for I	the following amo	ount:					
🖾 \$25.00 Filing Fee	🗇 \$30.00 Fil Certifica	ing Fee & te of Status	S55.00 Filin Certified Co radditional cop		Certified C	of Status &	
Mailing Addre				reet Address;			
Registration Division of (egistration Section is the section of Corport of Corpor			
P.O. Box 63	27		Tł	he Centre of Ta	llahassee	_	
Tallahassee,	FL 32314			H5 N. Monroe allahassee, FL 3	Street, Suite 810 32303	D	

Ta:

2024-06-05 17:43:38 GMT

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(((H240001977953)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AVENTURA CEVI, LLC

(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 10/25/2017 and assigned

Florida document number L17000221350

This amendment is submitted to amend the following:

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

N/A

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

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)

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> <u>agent and/or the new registered office address here</u>:

Name of New Registered Agent:	/A
New Registered Office Address:	liner blorala street address
_	, Florida

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.

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(((H24000197795 3))) If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person-being added</u> or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	ESTEBAN CELI	3340 NE 190TH STREET SUITE 405	🗆 Add
		AVENTURA, FL 33189	Remove
			LChange
MGR	LUCIO ROBERTO FEGAN GUERRERO	3340 NE 190TH STREET SUITE 405	🔜 Add
		AVENTURA, FL 33180	🗆 Remove
			☐Change
			Li Add
			DRemove
			🗆 Change
	. <u></u>		DAdd
			URemove
			🗆 Change
			🖸 Add
			DRemove
			UChange

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(((H24000197795 3)))

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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If the record specifies 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 filed.

JUNE 5

2024

Esteban Celi

Signature of a member or authorized representative of a member

ESTEBAN CELL

Typed or printed name of signee

Filing Fee: \$25.00