117000262212

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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COVER LETTER

TO: Registration S Division of Co					
	I BROKERS LLC				
SUBJECT:	Name of Lur	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing			
Please return all corresp	ondence concerning this matter	to the following:			
	ROMINA BENESCH				
		Name of Person			
	BENESCH BROKERS LI	٦.			
		Firm Company			
	843 W 60TH STREET			19	123
	···	Address		" 	
	HIALEAH, FLORIDA 33				57 57
		City/State and Zip Code			
	ROMINA@BENESCH.PR				
	E-mail address: (to be used for future annual report not	Hication		
For further information	concerning this matter, please c	all:			
ROMINA BENESCH		305 9245915 at ()			
Name	of Person		ne Telephone Number		
Enclosed is a check for t	the following amount:				
室 \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (e of Status	
<u>Mailing Addre</u> Registration		<u>Street Address:</u> Registration Sc	ection		
Division of Corporations		Division of Corporations			
P.O. Box 63:		The Centre of		1.0	
Tallahassee,	FL 32314	2415 N. Monro	oc Street, Suite 81	ıΟ	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BENESCH BROKERS LLC				
(Name of the Limi	ted Liability Compa (A Florida Limited I	ny as it now appears Liability Company)	on our records.)	
The Articles of Organization for this Limited I. Florida document number £17000262212		were filed on $\frac{12/2}{}$	7/2017	and assigned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of				
The new name must be distinguishable and contain the		lity Company," the des	ignation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	843 W 60TH ST.	HIALEAH, FLO	RIDA, 33012
(Principal office address MUST BE A STREET ADDRESS)		843 W 60TH ST.		
			······································	T CN
Enter new mailing address, if applicable:		843 W 60TH ST,	HIALEAH, FLO	RIDA, 33012
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office : ess here:	address on our rec	cords, <u>enter the</u>	name of the new register
Name of New Registered Agent:				
New Registered Office Address:	843 W 60TH S			
	Emer Florida street address			
	ШАЦЕАН		, Floric	la 33012
		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 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

Title	Name	Address	Type of Action
			(DAdd
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			①Add
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Tective date, if other than the da n effective date is listed, the date must be te: If the date inserted in this block cument's effective date on the Depa	does not meet the applicable	date of filing or more le statutory filing r	(optio than 90 days after t equirements, this	iling.) Pu	rsuant to 605.02 not be listed
ecord specifies a delayed effective di is filed.		e, at 12:01 a.m. on	the earlier of: (b)	The 90	th day after th
JUNE 2ND ted	2023	. /			

Filing Fee: \$25.00