

L18000086321

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

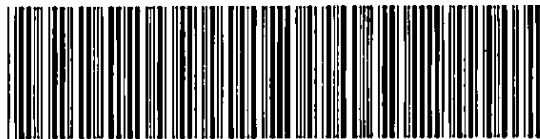
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## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

900 GUAVA ISLE, LLC

SUBJECT: \_\_\_\_\_

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

David Nudel

\_\_\_\_\_  
Name of Person

Hagen & Hagen, P.A.

\_\_\_\_\_  
Firm/Company

3531 Griffin Road

\_\_\_\_\_  
Address

Fort Lauderdale, FL 33312

\_\_\_\_\_  
City/State and Zip Code

dnudel@hagenlawfirm.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Nudel

305 778-3068

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 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, FL 32314

**STREET/COURIER ADDRESS:**

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

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TALLAHASSEE, FLORIDA

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

900 GUAVA ISLE, 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 03/05/2018 and assigned  
Florida document number L18000058321

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited 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:

3032 EAST COMMERCIAL BLVD, SUITE #76

(Principal office address MUST BE A STREET ADDRESS)

FORT LAUDERDALE, FL 33308

Enter new mailing address, if applicable:

3032 EAST COMMERCIAL BLVD, SUITE #76

(Mailing address MAY BE A POST OFFICE BOX)

FORT LAUDERDALE, FL 33308

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

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City, Florida

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

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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>	<u>Address</u>	<u>Type of Action</u>
P	BIETRY, RAINIER	3032 E Commerical Blvd.	<input type="checkbox"/> Add
		Suite #76	<input checked="" type="checkbox"/> Remove
		Fort Lauderdale, FL 33308	<input type="checkbox"/> Change
MGR	BIETRY, RAINIER	3032 East Commercial Blvd.	<input checked="" type="checkbox"/> Add
		Suite #76	<input type="checkbox"/> Remove
		Fort Lauderdale, FL 33308	<input type="checkbox"/> Change
MGR	STEFFEN, REMO	3032 E Commerical Blvd.	<input type="checkbox"/> Add
		Suite #76	<input checked="" type="checkbox"/> Remove
		Fort Lauderdale, FL 33308	<input type="checkbox"/> Change
AMBR	STEFFEN, REMO	3032 East Commercial Blvd.	<input checked="" type="checkbox"/> Add
		Suite #76	<input type="checkbox"/> Remove
		Fort Lauderdale, FL 33308	<input type="checkbox"/> Change
MGR	KORPE, KEMAL	3032 E Commerical Blvd.	<input type="checkbox"/> Add
		Suite #76	<input checked="" type="checkbox"/> Remove
		Fort Lauderdale, FL 33308	<input type="checkbox"/> Change
AMBR	KORPE, KEMAL	3032 East Commercial Blvd.	<input checked="" type="checkbox"/> Add
		Suite #76	<input type="checkbox"/> Remove
		Fort Lauderdale, FL 33308	<input type="checkbox"/> Change

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TALLAHASSEE, FL 32304

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**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated Apr. 13, 2018

Signature of a member or authorized representative of a member

Typed or printed name of signee