L18000060670

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S. ROBERTS
Jun 2 3 2023

COVER LETTER

TO: Registration Se Division of Cor			
	TRUST LLC		
SUBJECT:	Name of Limi	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
	ondence concerning this matter	-	
	_ Eileen	Santana Name of Person	
	CORAL GABLES TRUST	`COMPANY	
		Firm/Company	
	255 ALHAMBRA CIRCL	E, SUITE 333	
		Address	
	CORAL GABLES, FL 331	34	
		City/State and Zip Code	
	ESANTANA@CGTRUST. E-mail address: (1	COM to be used for future annual report noti	ification)
For further information of	concerning this matter, please ca	all:	
EILEEN SANTANA		786 497-1213	
Name o	f Person	at () Area Code Daytim	ne Telephone Number
Enclosed is a check for the	he following amount:		
□ \$25.00 Filling 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 Addres Registration (<u>Street Address:</u> Registration Sc	ection
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee	
1.O. DOX 032	. /	THE COME OF	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MATEISATRUST 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 MARCH 07, 2018 and assigned Florida document number <u>L18000060670</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: ISAMAT LLC 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: (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, 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 , 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.

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:

or removed	trom our records:		
MGR = M $AMBR = M$	lanager authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			DAdd
			□Remove
			[]Change
		 	□Add
			[□Rcmove
		 	Change
	 		DAdd
			ClRemove
			□ Change
			DAdd
			□Remove
			□Change
		 	□ Add
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Effectiv	re date, if other than the date of filing: (optional)
lfan effe Note⊷l	ctive 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 605.0207 if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
docume	nt's effective date on the Department of State's records.
	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
rd is file	
	Ppril 28. 2023.
Dated _	$\frac{1}{2}$
	i/////////////////////////////////////
	Signature of a member or authorized replasentative of a member
	Dishard DaNapali, CTO for Caral Cables Trust
	Richard DeNapoli, CTO for Coral Gables Trust

Filing Fee: \$25.00