## 118000064726

,
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT . MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300310806633

03/23/18--01005--023 \*\*25.00

18 MAR 23 AM 6: 3

FILED SECRETARY OF STATE ALLAHASSEE, FLORIDA

N COOPER MAR 2 8 2018

## **COVER LETTER**

	Registration Sec Division of Corp			
SUBJEC	CELAJES, I	TC		
SUBULE		Name of Limit	ed Liability Company	
The enclo	sed Articles of A	mendment and fee(s) are subn	nitted for filing.	
Please ret	urn all correspon	dence concerning this matter to	o the following:	
		YSAAC CORONADO		
			Name of Person	
		CELAJES, LLC		
			Firm/Company	
•		13035 SW 132 AVE		
			Address	<del></del>
		MIAMI, FL 33186		
			City/State and Zip Code	··
		administration@daycovenco		
		E-mail address: (to	o be used for future annual report notifica	tion)
For further	er information co	ncerning this matter, please ca	11:	
ANA P I	MORA		786 7176007	
	Name of	Person	Area Code Daytime To	elephone Number
Enclosed	is a check for th	e following amount:		
\$25.0	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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CELAJES, LLC			
(Name of the Limited Li (A F	ability Compa orida Limited I	ny as it now appears on our rec Liability Company)	ords.)
The Articles of Organization for this Limited Liabili	ity Company	were filed on 03/12/2018	and assigned
Florida document number L18000064726			
This amendment is submitted to amend the following	g:		
A. If amending name, enter the new name of the	limited liab	ility company here:	
The new name must be distinguishable and contain the words	"Limited Liabil	lity Company," the designation "l	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	:	13035 SW 132 AVE	
(Principal office address MUST BE A STREET A.		MIAMI, FL 33186	<b>89</b> . ⊢ C R
			R AA
			SSE SSE
Enter new mailing address, if applicable:		13035 SW 132 AVE	A FOR
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	<u>80</u>	MIAMI, FL 33186	<b>6:</b> C.S.Y.
			3: DAIE
B. If amending the registered agent and/or registered agent and/or the new registered office			ords, enter the name of the new
Name of New Registered Agent:	NA P MORA		
New Registered Office Address:	3035 SW 132		
		Enter Florida street aa	dress
<u> </u>	/IIAMI		, Florida <u>33186</u>
·		City	Zip Code
New Registered Agent's Signature, if changing Regis	stered Agent:	_	

If Changing Registered Agent, Signature of New 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>	<u>Address</u>	Type of Action
MGRM	YSAAC A CORONADO		□ Add
			□ Remove
		13035 SW 132 AVE MIAMI FL 33186	Change
MGRM	DANIEL J CORONADO		Add
			Remove
		13035 SW 132 AVE MIAMI FL 331 86	■ Change
		<del></del>	☐ Remove
			Change
		<u> </u>	
		<del></del>	□ Remove
			Change
			Add
			Remove
			Change
			Add
		<del> </del>	Remove
			Change

	<u></u>			<u> </u>
		<del> </del>		<del></del>
			<del></del>	<del></del>
				<del>_</del> ਛਂ
			· · · · · · · · · · · · · · · · · · ·	MAR 23
				<u>ည</u> တု
	<del></del> .			
	_		_	
			• • •	
fective date, if other than the date on effective date is listed, the date must be ote:  If the date inserted in this block ocument's effective date on the Department.	specific and cannot be prior to d does not meet the applicable	statutory filing requirer	nents, this date will not	at to 605.0207 be listed as
record specifies a delayed ef The 90th day after the record		n effective time, at	12:01 a.m. on the	earlier o
MARCH 21ST	, 2018	A Short		
		May you		

Page 3 of 3

Filing Fee: \$25.00