

6/4/2019

Division of Corporations

Florida Department of State
Division of Corporations
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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CESAR A. ABBOTT, STRUCTURAL P.E., LLC**

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M. SOLOMON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CESAR A. ABBOTT, STRUCTURAL P.E., LLC

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:

Cheyenne Moseley

Name of Person

Legalzoom.com, Inc.

Firm/Company

101 N. Brand Blvd., 11th Floor

Address

Glendale, CA 91203

City/State and Zip Code

abbottcesar@hotmail.com

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

For further information concerning this matter, please call:

Cheyenne Moseley

800

773-0888 ext. 9724

Name of Person

at (_____)_____
Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

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☒ \$55.00 Filing Fee &
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☐ \$60.00 Filing Fee,
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(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**

CESAR A. ABBOTT, STRUCTURAL P.E., 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 03/29/2018 and assigned
Florida document number 11S000081072

This amendment is submitted to amend the following:

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

Cesar A Abbott, NASM CPT, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

1900 N. Bayshore Dr., Unit 2616

(Principal office address MUST BE A STREET ADDRESS)

Miami, Florida 33132

Enter new mailing address, if applicable:

1900 N. Bayshore Dr., Unit 2616

(Mailing address MAY BE A POST OFFICE BOX)

Miami, Florida 33132

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:

Cesar A Abbott

New Registered Office Address:

1900 N. Bayshore Dr., Unit 2616

Enter Florida street address

Miami

, Florida 33132

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

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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>
AMBR	ABBOTT, CESAR A	333 NE 24TH ST., APT. 1011	☐ Add
		MIAMI, FL 33137	☒ Remove
AMBR	Cesar A. Abbott	1900 N. Bayshore Dr., Unit 2616	☒ Add
		Miami, Florida 33132	☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

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

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 05/22/2019 _____



Signature of a member or authorized representative of a member

Cesar A. Abbott

Typed or printed name of signer

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