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(Re	questor's Name)	
	dress)	
(Ad	dress)	
(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:		
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COVER LETTER

ТО	Registration Se Division of Cor			
SU	вјест: <u>SPARR</u>	OW ESTATES LLC Name of Limit	ed Liability Company	 -
The	e enclosed Articles of .	Amendment and fee(s) are subn	nitted for filing.	
Ple	ase return all correspo	ndence concerning this matter to	o the following:	
		DIECSON VILAR	Name of Person	
		DOMINIUM CON	SULTING Firm/Company	
		28 WEST FLAG	LER ST SUITE 300E	3
		MIAMI, FL 33130	City/State and Zip Code	
		DIECSON@DOMINI E-mail address: (to	UM.CONSULTING be used for future annual report notifi	cation)
For	further information co	oncerning this matter, please cal	l:	
<u>DI</u>	ECSON VILAR Name of		at (305) 521.890 Daytime	Telephone Number
Enc	losed is a check for th	e following amount:		
55 1	\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 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 ARTICLES OF ORGANIZATION **OF**

SPARROW ESTATES 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 L	iability Company w	vere filed on 06/26/2018	and as:	signed
Florida document number <u>L18000155</u>	901			
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name of	f the limited liabili	ty company here:		
The new name must be distinguishable and contain the	vords "Limited Liability	Company," the designation "LLC" or the abb	reviation "L	.1C."
Enter new principal offices address, if applied	able:			<u> </u>
(Principal office address MUST BE A STREE	ET ADDRESS)		—————————————————————————————————————	SEC 33S
		- 1		<u> </u>
			20	48.7 20.7 10.7 10.7 10.7 10.7 10.7 10.7 10.7 1
Enter new mailing address, if applicable:			몿	22 9 L
(Mailing address MAY BE A POST OFFICE	BOX)		တ္	AZ.
			မ	0.1
B. If amending the registered agent and registered agent and/or the new registered o	ffice address here:			
Name of New Registered Agent:	DOMINIUM	CONSULTING SERVICES		LLC
New Registered Office Address:	28 W FLA	GLER ST SUITE 300B Enter Florida street address		
	MIAMI	, Florida 33	130	
		City	Zip Code	
New Registered Agent's Signature, if changing I	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
AMBR	PAULO ANGELO DA SILVA	2426 JOHNSON ST	Add
		HOLLYWOOD, FL 33020	■ Remove
			➤ Change
AMBR	NEUZA ALVES DA SILVA	2426 JOHNSON ST	Add
		HOLLYWOOD, FL 33020	Remove
			Change
			■ Add
		·	■ Remove
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ective date, if other than effective date is listed, the date: If the date inserted in tument's effective date on	late must be specific this block does n	and cannot be prio of meet the appli	cable statutory filin	ore than 90 days afte	ional) r filing.) Pursuant to is date will not be	o 605.020 : listed a
record specifies a de he 90th day after th	elayed effectiv ie record is file	re date, but no ed.	ot an effective t	ime, at 12:01	a.m. on the e	arlier (
ed AUGUST	15	2018				
Paylo d	Ang co da	Silva	·			_
· · · · · · · · · · · · · · · · · · ·	. 🗸 — Signafure o	of a member or auth	orized representative	of a member		

Page 3 of 3

Filing Fee: \$25.00