L18000186603

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(Ad	dress)	
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COVER LETTER

TO: Registration S Division of Co		
SUBJECT:	Montesi I LLC	
NONJIKOT.	Name of Limited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are submitted for filling.	
Please return all corresp	pondence concerning this matter to the following:	
	Karolina Torres Name of Person	
	KTOPPES SERVIUS CORP	
	600 5 Federal Hwy ste 21	
	Derfield Brach A 3344 City/State and Zip Code Ktorres @ Ktorres Xrvices E-mail address: (to be used for litture annual report notification	1
	City/State and Zip Code	
	E-mail address; to be used for litture annual report notification	. <u>WM</u>
For further information	concerning this matter, please call:	
		2.1
<u>Karolin</u>	of Person at 1 561, 562 - 0. Area Code Daytime Tele	814
		200 - 100 -
linclosed is a check for	the following amount:	
□ \$25.00 Filling Fee	\$30.00 Filing Fee & D \$55.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
		13 E

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



August 22, 2018

KAROLINA TORRES KTORRES SERVICES CORP 600 S FEDERAL HWY, STE 207 DEERFIELD BEACH, FL 33441

SUBJECT: MONTESI I LLC Ref. Number: L18000186603

We have received your document for MONTESI LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$30.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 318A00017424

Diane Cushing Senior Section Administrator

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

<u> </u>	LL		
(<u>Name of the Limited Liab</u> (A Flori	<mark>ility Company as it now appear</mark> da Limited Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability Florida document number <u>L18000186605</u>		08/03/2018	and assigned
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the li</u>	mited liability company he	<u>re</u> :	
The new name must be distinguishable and contain the words "Li	imited Liability Company," the d	esignation "LLC" or the abbrevi	ation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADL	ORESS)	· · · · · · · · · · · · · · · · · · ·	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		our records, enter the	name of the n
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flor	ida street address	
	City	, Florida	in Cooks
	City	/	q-cow

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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member <u>Title</u> Address <u>Name</u> Type of Action Patricia Montesi Pereira 2592 Carambda Cir N MANDE AMBR Coconut Creek, Fr 32066 - Remove _____ Change Fernanda Montesi Pereira 2592 Carambola Cirl XADD KMBR Exemut Creek, R 33066 - Remove _□ Remove _□ Change □ Remove _□ Change □ Remove _□ Change \Box \land dd☐ Remove

_□ Change

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ctive date, if othe	r than the date of filing:			(optional)	
effective date is listed	the date must be specific and ca	annot be prior to date of	filing or more than 90	days after filing) Pursuant	to 605 0207
	ed in this block does not med te on the Department of Sta		tory filing requirem	ents, this date will not b	e listed as
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	a delayed effective dat or the record is filed.	te, but not an eff	ective time, at :	12:01 a.m. on the o	earlier o
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	Signature of a me	шост от живописа герг	esentative of a membe	:I	
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Filing Fee: \$25.00