

L18000 199 775

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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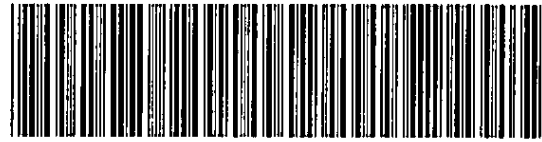
(Business Entity Name)

(Document Number)

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22 JAN 14 PM 3:20

T. MATTHEWS

JAN 21 2022

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: North Miami Investments, 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:

Stephen J. Straley, Esq.

Name of Person

Straley | Otto

Firm/Company

2699 Stirling Road, Suite C-207

Address

Fort Lauderdale, Florida 33312

City/State and Zip Code

enhancemiami@gmail.com

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

For further information concerning this matter, please call:

Jose Peirats

786

319-8010

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

22 JUL 1963 11:5:20

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

This amendment is submitted to amend the following:

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

(Mailing address MAY BE A POST OFFICE BOX)

_____, Florida _____
City Zip Code

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:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Catalina Vargas	14405 N.E. 10th Avenue	<input type="checkbox"/> Add
		North Miami, Florida 33161	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Jose Peirats	14405 N.E. 10th Avenue	<input type="checkbox"/> Add
		North Miami, Florida 33161	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	One More Door Capital, LLC	14651 Biscayne Boulevard, #350	<input checked="" type="checkbox"/> Add
		North Miami Beach, Florida 33181	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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(If an effective 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 (3)(b)

If the record 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 record is filed.

Signature of a member or authorized representative of a member

Jose Peratz Tr Catalina Vargas Tr

Typed or printed name of signer

Filing Fee: \$25.00