

28000228518

(Requestor's Name)

(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:

Spoke to Peter on 10/31/18
Chg from PA from Esq.

Office Use Only



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10/16/18--01034--018 **25.00

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OCT 15 2018

19 OCT 31 PM 2:43

○ SIMMONS
OCT 31 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 22, 2018

BRUCE BOTSFORD
1615 SW 2 AVE
FT LAUDERDALE, FL 33315

SUBJECT: 20450 FARM LLC
Ref. Number: L18000228518

We have received your document for 20450 FARM LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

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) 245-6051.

Octavia L Simmons
Regulatory Specialist III

Letter Number: 318A00021681

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 20450 FARM 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:

BRUCE BOTSFORD

Name of Person

BRUCE BOTSFORD P.A.

Firm/Company

1615 SW 2 AVE

Address

FT LAUDERDALE, FL 33315

City/State and Zip Code

lazarodinh@gmail.com

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

For further information concerning this matter, please call:

LAZ DINH

786 693-0231
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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

20450 FARM 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 09/26/2018 and assigned
Florida document number L18000228518.

This amendment is submitted to amend the following:

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

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

Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

1314 E LAS OLAS BLVD #1210
FT. LAUDERDALE, FL 33301

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

1314 E LAS OLAS BLVD #1210
FT. LAUDERDALE, FL 33301

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:

BRUCE BOTSFORD, ESQ

New Registered Office Address:

1615 SW 2 AVE

Enter Florida street address

FT. LAUDERDALE

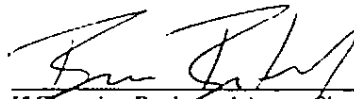
, Florida 33315

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

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	PEDRO SOLTURA	1109 WISTERIA LN	<input type="checkbox"/> Add
		NAPLES, FL 34105	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	DYNASTY PROPERTIES LLC	1314 E LAS OLAS BLVD #1210	<input checked="" type="checkbox"/> Add
		FT. LAUDERDALE, FL 33301	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

Multiple horizontal lines for amending information.

10 OCT 31 PM 12:48

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

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated _____

Handwritten signature of Russell Stern

Signature of a member or authorized representative of a member

Handwritten name: Russell Stern

Typed or printed name of signee