

L18000283956

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

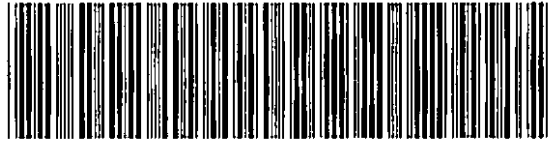
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

*WONG BOAM*

*6/16/21  
TIN*

Office Use Only



300361957713

03/16/21--01029--012 \*\*52.50

21 MAY 24 PM 3:42

*Handwritten notes*



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

2021 MAY 24 PM 2:25

OFFICE OF THE CLERK  
TALLAHASSEE, FL

May 6, 2021

SEBASTIAN A GOMEZ  
20200 W DIXIE HWY SUITE 1009  
AVENTURA, FL 33180

SUBJECT: WILLIAMSON 305, LLC  
Ref. Number: L18000283956

We have received your document for WILLIAMSON 305, LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA LP, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

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.

Tekayla T Matthews  
OPS

Letter Number: 721A00009447

# COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: WILLIAMSON 305 LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

SEBASTIAN A. GOMEZ  
Name of Person

WILLIAMSON 305 LLC  
Firm/Company

20200 W DIXIE HWY, SUITE 1009  
Address

AVENTURA, FL 33180  
City/State and Zip Code

SGOMEZ@EQUITY305.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SEBASTIAN A. GOMEZ at 786, 280-7818  
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

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

21 MAY 24 PM 3:42

WILLIAMSON 305 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 DECEMBER, 10<sup>th</sup> 2018 and assigned Florida document number L18000283956.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**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:

New Registered Office Address:

Enter Florida street address

Florida

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

21 MAY 24 PM 3:42

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	JORGE TEZANOS PINTO	20807 BISCAYNE BLVD.	<input type="checkbox"/> Add
		SUITE 104	<input checked="" type="checkbox"/> Remove
		AVENTURA, FL 33180	<input type="checkbox"/> Change
MGR	CARLOS ERICO THOMAS	21500 BISCAYNE BLVD.	<input type="checkbox"/> Add
		SUITE 401	<input checked="" type="checkbox"/> Remove
		AVENTURA, FL 33180	<input type="checkbox"/> Change
AMBR	JORGE TEZANOS PINTO	20807 BISCAYNE BLVD.	<input checked="" type="checkbox"/> Add
		SUITE 104	<input type="checkbox"/> Remove
		AVENTURA, FL 33180	<input type="checkbox"/> Change
AMBR	CARLOS ERICO THOMAS	21500 BISCAYNE BLVD.	<input checked="" type="checkbox"/> Add
		SUITE 401	<input type="checkbox"/> Remove
		AVENTURA, FL 33180	<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

21 MAY 24 PM 3:42

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

Multiple horizontal lines for amending information.

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 MAY 18th 2021

Signature of a member or authorized representative of a member
SEBASTIAN A. COLUCCI
Typed or printed name of signer