11/20/2020

Division of Corporations

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FASTKIT CORP Account Number : 120100000009 Phone : (305)599-0839 Fax Number : (305)592-9591

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

2266 SW 2 STREET LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2266 SW 2 STREET LLC			
(Name of the Limited L.	ability Company as it now appears on o lorida Limited Limbility Company)	ur records.)	
The Articles of Organization for this Limited Liabil	ity Company were filed on 02/12/20	and as	signed
lorida document number L19000042356	 •		
his amendment is submitted to amend the following	g:		
L If amending name, enter the new name of the	limited liability company here:		
he new name must be distinguishable and contain the words	"Limited Liability Company," the designat		LC.
nter new principal offices address, if applicable	· · · · · · · · · · · · · · · · · · ·	020	
Principal office address MUST BE A STREET A.	DDRESS)	10	<u></u>
		20	
		>	
nter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX	0		
		: , · O	
. If amending the registered agent and/or registered agent and/or the new registered office address he		s, enter the name of the ne	w registe
Name of New Registered Agent:			
New Registered Office Address:		. <u></u>	
	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

Title	Name	Address	Type of Action
AMBR	PEDRO PABLO VERAS	2266 SW 2 STREET	
		MIAMI, FL 33135	□Remove
			€ Change
MGR	ROGELIO HERNANDEZ	801 S MIAMI AVENUE; APT 2601	O&
•		MIAMI, FL 33131	O ASSE
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fective date, if other than the date of filing: _ in effective date is listed, the date must be specific and can	(opti	ional) r filing.) Pursuant to 605,02
ote: If the date inserted in this block does not meet ocument's effective date on the Department of State	e applicable statutory filing requirements, thi	s date will not be listed a
record specifies a delayed effective date, but not an is filed.	ective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
NOVEMBER 19TH 2		
-		

Filing Fee: \$25.00