## 1190000 42961

Office Use Only



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## **COVER LETTER**

	Registration Sec Division of Corp		,			
SUBJEC		T# L19000042961 632 SW	12TH AVE LLC			
опи.с		Name of Lim	ited Liability Company			
The enclo	sed Articles of z	Amendment and fee(s) are sub-	mitted for filing.			
Please ret	urn all correspoi	ndence concerning this matter	to the following:			
		HANH DINH				
			Name of Person			
	632 SW 12 AVE LLC					
			Firm/Company			
	Address FORT LAUDERDALE FL 33312					
		FLHANH@GMAIL.COM	City/State and Zip Code			
		E-mail address: (	to be used for future annual report notif	ication)		
For furthe	r information co	oncerning this matter, please co	all:			
HANH D	INH		305 772-4596			
	Name of	Person	Area Code Daytimo	: Telephone Number		
Enclosed	is a check for th	e following amount:				
\$25.0	0 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:

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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 D OF

2019 AFR -8 PH 2:44

632 SW 12TH AVE LLC	2013 KIN O 111 21 44
(Name of the Limited I (A ]	Liability Company as it now appears on our records.) Florida Limited Liability Company)
The Articles of Organization for this Limited Liabi Florida document number L19000042961	ility Company were filed on 02/12/2019 and assigned
This amendment is submitted to amend the followi	ing:
A. If amending name, enter the new name of th	e limited liability company here:
The new name must be distinguishable and contain the words	s "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicabl	le:
Principal office address MUST BE A STREET A	ADDRESS)
	<del></del>
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BO	2.82)
	<del></del>
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, enter the name of the e address here:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
-	, Florida

## 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>	Type of Action
AR	OSCAR MONTALVO	632 SW 12 AVE FORT LAUDERDALE FL 33312	■ Add
			□ Remove
			Change
			Add
		<del></del>	□ Remove
			Change
			🗆 Remove
			Change
			□ Remove
			Change
			Remove
			Change
			Add
			□ Remove
			☐ Change

	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note: If	e date, if other than the date of filing:
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 0th day after the record is filed.
Dated	4/3/2019  Signature of a member or authorized representative of a member
	Hanh Dinh Typed or printed name of signee

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Filing Fee: \$25.00