## L190000 47441

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(5.1)
PICK-UP WAIT MAIL
(Business Entity Name)
(Datameter Lines)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special histoctions to raining Officer.

Office Use Only



500342149605

09/16/20 01000 001 \*\*25.00

2020 MAR 16 PH 4: 30

## **COVER LETTER**

	Registration Sec Division of Corp			
eun ine		adise Valley LLC		
SUBJEC	1:	Name of Lim	ited Liability Company	<del></del> *
The encto	sed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please ret	urn all correspo	ndence concerning this matter	to the following:	
		Lawrence Pasetti		
			Name of Person	· · ·
		SOCO Paradise Valley LL	C	
			Firm/Company	
		6005 Benjamin Road		
			Address	
		Tampa, Florida 33634		
			City/State and Zip Code	
		larry.pasetti@minimiscusa.c	com  to be used for future annual report notif	ication)
For furthe	er information co	oncerning this matter, please of	·	,
Lawrence	e Pasetti		813 777-9072	
	Name of	f Person	at () Area Code Daytime	: Telephone Number
Enclosed	is a check for th	ne following amount:		
<b>■</b> \$25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fec, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	Street Address: Registration Sec Division of Corp The Centre of T 2415 N. Monroe Tallahassee, FL	porations allahassee 2 Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SOCO Paradise Valley LLC		
( <u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our records imited Liability Company)	<u>··</u> )
The Articles of Organization for this Limited Liability Cor	mpany were filed on 02/18/2019	and assigned
lorida document number L19000047441	e.	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
SOCO Holdings LLC		
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC"	
Enter new principal offices address, if applicable:		7028 F
<u>Principal office address MUST BE A STREET ADDRE</u>	ESS)	
		निंद <b>च्छा</b> हैं। कुल ⊒क कर
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		30 Ring
3. If amending the registered agent and/or registered or and/or the new registered office address here:	office address on our records, <u>enter</u>	the name of the new regis
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Floride street address	i
		orida
	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 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>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			□ Add
			ALCO PRemove
			Som Garage
			F G Add
			□ Remove
			☐ Change
			Remove
			□Change
		<del></del>	
		-	□Remove
			□Change

		_				
				** ******		
		<del>                                     </del>				
			<u> </u>			
		1				
	<del></del>	<del>                                      </del>				
<u> </u>						
				2 v	) 2020	
		<u> </u>			2020 MAR	··· •
				HASS	<del>- 70</del> .	·
				SEF.		1 }
				- (n	<del>- 3</del> ;	
		<del></del> -		OR OR	4: <del>3</del> 0	
				£.,	<b>©</b>	
··						
Effective date, if other than t fan effective date is listed, the date r	he date of filing: nust be specific and cannot	t be prior to date o	f filing or more than 90	( <b>optional)</b> days after filing.) Purs	suant to 605.	0207
Note: If the date inserted in this	block does not meet the	e applicable stat	utory filing requiren	nents, this date will	not be liste	d as t
document's effective date on the	Department of State 8	records.				
e record specifies a delayed effec	tivo data, but not an aff	betive time, at 1	2-01 a.m. on the ear	ier of: (b) The 90r	h day after	the
rd is filed.	tive date, but not an en-	convenime, at i	2.07 d.m. on the can	ici oi; (ii) The Mi	n day arter	inc
	202					
Dated March 6		0 ·				
$\sim 10$	.#2					
/ 3 / 1	* U		presentative of a memb			

Typed or printed name of signee