## L19000053076

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2023 FEB 21 AN 10: 02 SUNT TO SEE, FL

## **COVER LETTER**

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

	DA S-206 LLC		
SUBJECT:	Name of Lim	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
	ZILDA GONTIJO		
	<del></del>	Name of Person	<del>-</del>
	APARECIDA S-206 LLC		
		Firm/Company	_
	3020 MARCOS DR APT :	S206	
	<u>-</u>	Address	_
	AVENTURA, FL 33160		
		City/State and Zip Code	2023 SEC
	LORENAGONTIJO3@GM		2023 FEB
	E-mail address: (	to be used for future annual report notification)	B 2
For further information c	oncerning this matter, please ca	all:	
ZILDA GONTIJO		305 7788070 at ( )	AHIO: 02
Name o	f Person	Area Code Daytime Telephone Number	ATE 02
Enclosed is a check for the	ne following amount:		
S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	ate of Status &
Mailing Addres Registration 5 Division of C	Section	Street Address: Registration Section Division of Corporations	
P.O. Box 632		The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

APARECIDA S-206 LLC		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited	inv as it now appears on our records.) Liability Company)	<del></del>
The Articles of Organization for this Limited Liability Company Torida document number L19000053076.	were filed on <u>02/02/2019</u>	and assigned
This amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "L.L.C."
inter new principal offices address, if applicable:	3020 MARCOS DR APT \$206	
Principal office address MUST BE A STREET ADDRESS)	AVENTURA FL 33160	
		2023 FI
		CD -=====
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		AMIO:
		02
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the</u>	name of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Floric	
	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>	<u>Name</u>	Address	Type of Action
MGR	ZILDA MARIA GONTIJO	3020 MARCOS DR APT S206	■Add
		AVENYURA FL 33160	□ Remove
			☐Change
MGR	TATIANA GONTIJO BERNARDI	3020 MARCOS DR APT S206	<b>≣</b> Add
		AVENTURA FL 33160	□ Remove
			☐ Change
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			□Change
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fective date, if other than the date of filing:  output  outpu	of filing or more than 90 days after	ional) r filing.) Pursuant to 605.0 is date will not be listed	0207 d as 1
eument's effective date on the Department of State's records.			
and an information and desired for the latest terms of the latest	13/01	) TH 00-1 1 0	41
ecord specifies a delayed effective date, but not an effective time, at is filed.	12:01 a.m. on the earlier of: (b	b) The 90th day after t	the
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ted 2023		2023 FEB 21 AH IO:	وشتر
		G C	ر روست
Yours ImBerra		10	:
MGR LORENA GONTINO BE	epresentative of a member	<b>房</b> 等 <b>主</b>	jō
MGR LOPENIA CONTO - 30	11110	2. E	-

Filing Fee: \$25.00