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5/29/2019 8:44:29 AM PDT

3239628300 From Meghan Smith

5/29/2019

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:	Division of Corp				
	Fax Number :	(850)617-6383			
From:					2019 MAY
		LEGALZOOH.COM INC.			46
	Account Number :				P
		(323)962-8600			~ .
	Fax Number :	(323)902-3889			- ¹ ² ²
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COVER LETTER

TO:	Registration Section
	Division of Corporations

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PARK 73 LLC

SUBJECT:

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cheyenne Moseley

Name of Person	
Legalzoom.com, Inc.	201
Firm/Company	AN 60
101 N. Brand Blvd., 11th Floor	F F
Address	
Glendale, CA 91203	
City/State and Zip Code	
losemarin1939@yahoo.com	0
E-mail address: (to be used for future annual report notification	1)

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For further information concerning this matter, please call:

Cheyenne Moseley	800	773-0888 cxt. 9724
Name of Person	at () Arca 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/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PARK 73 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 <u>03/15/2019</u> and assigned Florida document number <u>L19000073692</u>

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 end with 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)		<u> </u>
		P10
	·	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		C C

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 addr	ur
	, I	Florida 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

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If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or</u> Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

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Title	Name	Address	Type of Action
AMBR	SUSANA JIRON-MIRAN	1031 NW 26TH AVE.	🖸 Add
		MIAM1, FL 33125	Е Remove
AMBR	JOHNATHAN MARIN	1031 NW 26TH AVE.	
		MIAMI, FL 33125	20 Remove APPAK
AMBR	Jonathan Marin	1031 NW 26th Ave.	APPKOVED AND FILED AY 29 Par 12: 0
		Miami, Florida 33125	D Benove
AMBR	Susana Jiron-Marin	1031 NW 26th Ave.	P Add
		Mlami, Florida 33125	Remove
			🗆 Add
			Remove
			D Add
			Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

..... . E. Effective date, if other than the date of filing: _______(optional (The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State) (optional) 5-16 2019 Dated _____ Signature of a member or subinorized representative of a member Jose Marin Typed or printed name of signee



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Filing Fee: \$25.00