

L19 000092641

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

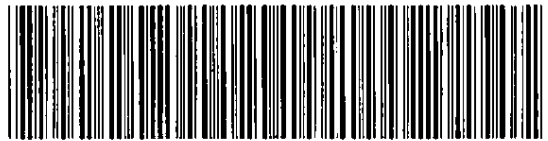
(Business Entity Name)

(Document Number)

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2024 AUG 27 PM 11:25

100435256161

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: COEP INVESTMENTS, LLC

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:

GLADYS SOTELDO

Name of Person

Firm/Company

210 BERENGER WALK

Address

ROYAL PALM BEACH, FL 33414

City/State and Zip Code

admin2@froehlichepa.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GLADYS SOTELDO

561 480-2336

at ( )

Name of Person

Area 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 Address:

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

2026 AUG 27 AM 11:25  
STATE OF FLORIDA  
TALLAHASSEE, FL

FILED

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

COEP INVESTMENTS, 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 04/05/2019 and assigned  
Florida document number L19000092641.

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 contain 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**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 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**

FILED  
APR 27 11:25  
STATE  
OFFICE

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	GLADYS SOTELDO	210 BERENGER WALK	<input checked="" type="checkbox"/> Add
		ROYAL PALM BEACH, FL 33414	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	THE CESAR OCTAVIO ELVIR	999 SW 1ST AVE, APT 1605	<input checked="" type="checkbox"/> Add
	PRIETO 2019 INTER VIVOS DECLARATION OF TRUST	MIAMI, FL 33130	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
CEO	Elvir Prieto, Cesar O. Sr.	41 SE 5th Street, Apt 1810	<input type="checkbox"/> Add
		Miami, FL 33131-2548	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove

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**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated AUGUST 21st

Signature of a member or authorized representative of a member

Typed or printed name of signee

FILED  
2024 AUG 27 AM 11:25  
CLERK OF DISTRICT COURT  
STATE OF TEXAS  
COUNTY OF DALLAS

**Filing Fee: \$25.00**