

L1900000 99170

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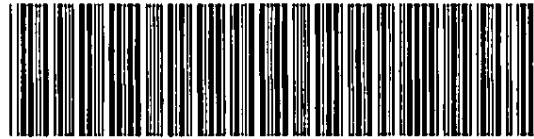
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*Amend*

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May 26, 2020

## Via Federal Express

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

**Re: Articles of Amendment to Articles of Organization of  
Summa Brickell, LLC**

To Whom it May Concern:

Please find enclosed the Articles of Amendment to Articles of Organization of Summa Brickell, LLC, which removes Mario Beltran as an Authorized Member, adds "Authorized Member" to Mike Hernandez's title, in addition to Manager, and changes the principal and mailing addresses of the company. Also enclosed herein is a check for \$60, for the filing fee, as well as for the certificate of status and certified copy fees.

Should you have any questions, please do not hesitate to contact me.

Very truly yours,

/s/ Kaari Gagnon

Encl.

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CORPORATIONS  
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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: SUMMA BRICKELL, 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:

Kaari Gagnon, Esq.

\_\_\_\_\_  
Name of Person

Zarco Einhorn Salkowski & Brito, P.A.

\_\_\_\_\_  
Firm/Company

2 S. Biscayne Blvd., Ste. 3400

\_\_\_\_\_  
Address

Miami, FL 33131

\_\_\_\_\_  
City/State and Zip Code

kgagnon@zarcolaw.com

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

For further information concerning this matter, please call:

Kaari Gagnon, Esq.

305 374-5418  
at (\_\_\_\_\_) \_\_\_\_\_  
Area Code Daytime Telephone Number

\_\_\_\_\_  
Name of Person

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

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d assigned

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

**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:**

777 Brickell Avenue, #500

***(Principal office address MUST BE A STREET ADDRESS)***

Miami, Florida 33131

**Enter new mailing address, if applicable:**

777 Brickell Avenue, #500

***(Mailing address MAY BE A POST OFFICE BOX)***

Miami, Florida 33131

**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**



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>	<u>Type of Action</u>
AMBR	Mario J. Beltran	JOSE MARIA VELASCO 13. 202	<input type="checkbox"/> Add
		MEXICO CITY, MX 03900	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Mike Hernandez	777 Brickell Avenue, #500	<input checked="" type="checkbox"/> Add
		Miami, Florida 33131	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

Add Authorized Member to Mike Hernandez's title, in addition to Manager.

[illegible]

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated May 22, 2020

Signature of a member or authorized representative of a member

**Mike Hernandez, Manager**

Typed or printed name of signee

**Filing Fee: \$25.00**