## 49000 106 902

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SECRETARY OF STATE

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## **COVER LETTER**

	Registration Se Division of Cor				
SHD IE		OPERTY LLC			
SUBJEC		Name of Lim	ited Liability Company		
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	turn all correspo	ondence concerning this matter	to the following:		
		PLAZ. NICOLAS			
			Name of Person		
			Firm/Company		
		18946 NW 10 ST			
		-	Address		
		PEMBROKE PINES, FL.	33029		
		info@sonoproperty.com	City/State and Zip Code		
		E-mail address: (to be used for future annual report notification)			
For furth	er information c	oncerning this matter, please ca	all:		
PLAZ, N	NICOLAS		561 6036655		
	Name o	of Person		me Telephone Number	
Enclosed	l is a check for th	he following amount:			
\$25.0	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)	
	MAIL	ING ADDRESS:	STREET/COUF	RIER ADDRESS:	

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

SONO PROPERTY LLC

(Name of the Limited Liability Company as it now appears on our records) ACC 16 P 49 ACC 16 P 49

	City	Zip Code
	PEMBROKE PINES	Florida 33029
New Registered Office Address:	18946 NW 10 ST	rida street address
Name of New Registered Agent:	PLAZ, NICOLAS	
B. If amending the registered agent and registered agent and/or the new registered of		our records, enter the name of the ne
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	EBOX)	
Fator now mailing address if and leading		
(Principal office address MUST BE A STRE	ET ADDRESS)	
Enter new principal offices address, if appli	cable:	
The new name must be distinguishable and contain the	words "Limited Liability Company," the c	lesignation "LLC" or the abbreviation "L.L.C."
A. If amending name, enter the new name of	_	<u>ere</u> :
This amendment is submitted to amend the fol	lowing:	
Florida document number 1.19000106902	·	
The Articles of Organization for this Limited I	liability Company were filed on or	hid assigned

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, <u>enter the title, name, and address of each person</u> <u>being addedor removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	PUEYO, DANIEL JESUS	2655 SOUTH LE JUNE RD	<b>5</b>
		SUITE 403	
			■ Remove
		CORAL GABLES, FL 33134	Change
			Add
			□ Remove
			Change
			Add
			Remove
			Change
<del></del>	<del></del>		Add
			□ Remove
		<del></del>	Change
			□ Remove
			Change
			Add
			□ Remove

(H'an c <u>Note</u>	08/16/2019  ctive date, if other than the date of filing:
b) Th	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
	4 1 20 19
Date	1 - 7139351 - 16 - 1 - 2011 .
Date	d August 16 . 2019 .  Signature of a member or authorized representative of a member

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Filing Fee: \$25.00