119000140348

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(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
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HON TO SOLA



November 12, 2019

MARIA JOSE GRANADOS GODAY 1200 BRICKELL AVE STE 850 MIAMI, FL 33131

SUBJECT: J177 LLC

Ref. Number: L19000140348

We have received your document for J177 LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

M IS NOT A CORRECT TITLE.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 419A00023208

Catherine M Wood Regulatory Specialist II

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: T177 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:
Maria Tose Franados- Froday
SIMIPLY LIGAL LL P
1200 Brickell Averine #850
Migmi, FL 33131 City/State and Zip Code
E-mail address (to be used for filture ampual report notification)
For further information concerning this matter, please call:
Maria TUP Hranadu - Frodoy at 305 858-10208 Name of Person Daytime Telephone Number
Enclosed is a Theck for the following amount: \$\sigma \frac{\congrue{25.00}}{\congrue{25.00}} \text{Filing Fee} \sigma \frac{\congrue{25.00}}{\congrue{25.00}} \text{Filing Fee} \text{Certificate of Status} \text{Certified Copy} \text{Certified Copy} \text{Certified Copy} \text{(additional copy is enclosed)} \text{Certified Copy} \text{Certified Copy} \text{(additional copy is enclosed)} \text{Certified Copy} \text{Certified Copy} \text{(additional copy is enclosed)} \text{(additional copy is enclosed)} \text{(additional copy is enclosed)} \text{(additional copy is enclosed)} \text{(additional copy is enclosed)} \text{(additional copy is enclosed)} \text{(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

T177 LLC					
Name of the Limited Liabil (A Florid	ity Company as it now a Limited Liability Com	appears on our reco pany)	ords.)		
The Articles of Organization for this Limited Liability (Florida document number <u>L19000140348</u>	Company were filed	on <u>05/2</u> 1	1/19	and assig	gned
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the lin	ited liability comp	any here:			
The new name must be distinguishable and contain the words "Lir	nited Liability Company	," the designation "L	LC" or the abbrevi	ation "LL	C.*
Enter new principal offices address, if applicable:			(.		
(Principal office address MUST BE A STREET ADD.	RESS)		7.		
				<u> </u>	<u>"" ; </u>
			. .	25	78701
Enter new mailing address, if applicable:			<u> </u>		
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>		
			71:	<u></u>	
			•	. —	
B. If amending the registered agent and/or registered agent and/or the new registered office ado		ess on our reco	rds, <u>enter the</u>	name of	f the nev
registered agent and/or the new registered office add	iress here:				
Name of New Registered Agent:					
New Registered Office Address:					
	Er	iter Florida street ada	lress		
			Florida		<u>.</u>
	Cty		Z	lıp 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 = Man AMBR = Aut	ager horized Member		Typy of Action
Title	Name	Address	
Mar	Marcio Pedreira	1200 Brickell Ave Swiess	_ □ Add
1-101	(Marcio pedreira)	Miami F. 33/31	Remove
			Changle
Mar	<u>Unudia Pedreira</u> ciaudia pedreira)	1200 Brichell Ark. Suit 350 Mani, FC 33/31	OKdd
	claudia pedreira)	Mani, FC 33/31	☐ Remove
			Change
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Note:	ive date, if other than the date of filing: [cetive 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. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.
he red The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated	OCHOPY ZAGA - ZA
	Maria Jose Granados-Codou

Page 3 of 3

Filing Fee: \$25.00