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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : AGI REGISTERED AGENTS, INC.

Account Number : I20000000205 Phone : (305)416-6800 Fax Number : (305)416-6811

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

jose Dagi-ra com

A.M.A.C. 74.11.

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN YP 2208, LLC

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AUGHE® 2019 M. SOLOMON 08/16/2019 15:37 3054166811

## COVER LETTER

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TO: Registration S Division of Co			
YP 2208, 1	LLC		
SUBJECT:		nited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Jose M. do la O		
		Name of Person	
	1000 Brickell Ave.		
		Firm*Company	
	Suite 300		
	·	Address	
	Miami, FL 33131		
	jose@agi-ra.com	City/State and Zip Code	
		to be used for future annual re	port notification)
For further information of	concerning this matter, please c	al!;	
Jose M. de la O		305 416-6	5800
Name o	of Person	at () Area Code	Daytime Telephone Number
Enclosed is a check for t	he following amount:		
S25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tailahassee, 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

(((H19000245095 3)))

(Name of the Limited Liability Compan	v as it now unpears on our records )	<del></del>		
(Name of the Limited Liability Compan (A Florida Limited L	ability Company)			
The Articles of Organization for this Limited Lighting Community	a. June 21, 2019			
The Articles of Organization for this Limited Liability Company were filed on June 21, 2019			and assigned	
Florida document number L19000163878				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabil	ity company here:			
he new name must be distinguishable and contain the word of the contain the second of the second of the contain the second of the second of the contain the second of the cont				
he new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "LLC" or the	abbreviation "L	L.C."	
Enter new principal offices address, if applicable:		,	<u>جي</u>	
Principal office address MUST BE A STREET ADDRESS)			Lip	
			<del>-</del> 5	
		1111	<u></u>	
nter new mailing address, if applicable:		· · · · · · · · · · · · · · · · · · ·		
		··-	Ξ,	
Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	1-	<u> </u>	
			€B	
. If amending the registered agent and/or registered office address here:  Name of New Registered Agent:  New Registered Office Address:	ce address on our records, ente	r the name	of the	
	Enter Florida street address			
	, Florida _	Zip Code		
	City			
ew Registered Agent's Signature, if changing Registered Agent:	City	Zip Code		

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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.

08/16/2019 15:37 3054166811

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 (((H19000245095 3)))

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Page 3 of 3

Robert R. Adams, Authorized Representative

Filing Fee: \$25.00

Typed or printed name of signee