

L19000 168 611

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

2980-



700332833867

08/08/19--01032--001 **\$5.00

2019 OCT -7 PM 1:12

FILED

GOLDEN

OCT - 9 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MiamiFunFloats, 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:

Adrian Avila
Name of Person

miamiFunFloats, LLC
Firm/Company

2015 Biscayne Blvd #142
Address

Miami, FL, 33137
City/State and Zip Code

adrian@miamiFunFloats.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Adrian Avila at 951 292-5215
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 13, 2019

ADRIAN AVILA
2045 BISCAYNE BLVD. #142
MIAMI, FL 33137

SUBJECT: MIAMIFUNFLOATS, LLC
Ref. Number: L19000168611

We have received your document and check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned to you for the following reason(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).

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.

Claretha Golden
Regulatory Specialist II

Letter Number: 219A00016699

RECEIVED
2019 OCT -7 PM 12:49

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

2019 OCT -7 PM 1:12

MiamiFunFloats, 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 06/27/2019 and assigned
Florida document number L19000168611.

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)

2045 Biscayne BLVD
#142 Miami, FL
33137

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2045 Biscayne BLVD
#142 Miami, FL
33137

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:

2045 Biscayne BLVD #142
Enter Florida street address
Miami, Florida 33137
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>
MGR	Adrian Avila	20901 San.	<input type="checkbox"/> Add
		Simeon way APT 202	<input type="checkbox"/> Remove
		Miami, FL 33179	<input checked="" type="checkbox"/> Change
MGR	Stephanie A. Vega	1810 SW 82 Terrace	<input type="checkbox"/> Add
		Miramar, FL	<input type="checkbox"/> Remove
		33025	<input checked="" type="checkbox"/> Change
AMBR	Craig Hagen	819 NE 17 th Way	<input type="checkbox"/> Add
		Fort Lauderdale, FL	<input type="checkbox"/> Remove
		33304	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(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)

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 August 8, 2019

Signature of a member or authorized representative of a member

Adrian Avila
Typed or printed name of signee