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1.	INMOBILIARIA E INVE		ES BMA LLC		
2.	(CORPORATE NAME AND DOCUME	ENT #)			
3.	(CORPORATE NAME AND DOCUME	ENT #)			
4.	(CORPORATE NAME AND DOCUME	ENT#)			
5.	(CORPORATE NAME AND DOCUME	ENT#)	 		
6.	(CORPORATE NAME AND DOCUME	ENT#)			
SPECIA INSTRU	AL JCTIONS:				
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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INMOBILIARIA E INVERSIONES BMA 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 Li Florida document number L19000183119	ability Company	were filed on 07/16/	and assigned
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	the limited liab	oility company here:	
The new name must be distinguishable and contain the w	ords "Limited Liabi	ility Company," the design	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	able:	2999 NE 191ST ST	REET, SUITE 402
(Principal office address MUST BE A STREE		AVENTURA, FL 3.	3180
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2999 NE 191ST ST AVENTURA, FL 3.	
B. If amending the registered agent and/or reagent and/or the new registered office addres		address on our recor	ds, enter the name of the new registered
Name of New Registered Agent:			
New Registered Office Address:	2999 NE 1915	T STREET, SUITE 402	
	<u> </u>	Enter Florida s	reet address
	AVENTURA		, Florida 33180
		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

Title	Name	Address	Type of Action
MGR	Henjamin Andres Panza Csendes	2999 NE 191ST STREET, SUITE 402	≣ Add
		AVENTURA, FLORIDA 33180	□Remove
			(Change
MGR	Matias Ignacio Panza Csendes	2999 NE 191ST STREET, SUITE 402	
		AVENTURA. FLORIDA 33180	□ Remove
			□Add
			CIRemove
			Change
			∏Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			CiAdd
			□Remove
			□ Change

	ther information, enter change(s) here: (Attach additional sheets, if necessary.)
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TAGE: If the date inserted in	than the date of filing: date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 in this block does not meet the applicable statutory filing requirements, this date will not be listed as in the Department of State's records.
record specifies a delayed e l is filed.	effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
April 12	2022
	Downdo
	Signature of a member or authorized representative of a member
PAULA CSENDES	S GONZALEZ - Manager & Authorized Representative of the Member(s)
	Typed or printed name of signee

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