L19000 213 000

(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:	
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Office Use Only



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Amend

NOV 0 5 2019 I ALBRITTON

COVER LETTER

	of Corporations	
SUBJECT:	+ Sac Inw Street & #8, LLC Name of Limited Liability Company	
The enclosed A	icles of Amendment and fee(s) are submitted for filing.	
Please return all	correspondence concerning this matter to the following:	
	SOLIA Cabloon	
	Ditsac Hanafement	
	1314 E. Las Dlas Blud #	1\
	Fort (audurale T-L 3330) City/State and Zip Code	
Con fination in far	E-mail address: (to be used for future annual report notification) nation concerning this matter, please call:	
Lava	Clement: 954, 5885078	
	Name of Person Area Code Daytime Telephone Number	
En c losed is a ch	ck for the following amount:	
\$25.00 Filir	Fee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee. Certificate of Status Certified Copy (additional copy is enclosed) 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 Tallahassee, FL 32301	



October 9, 2019

SOFIA CASTRO 1314 E. LAS OLAS BLVD #1111 FORT LAUDERDALE, FL 33301

SUBJECT: ORTSAC INVESTMENTS #8, LLC

Ref. Number: L19000213000

We have received your document for ORTSAC INVESTMENTS #8, 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):

X

111

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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: 919A00020726

Irene Albritton Regulatory Specialist II

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF .

(Name of the Limited Liability Company as it now appears on our r	ecords.)
The Articles of Organization for this Limited Liability Company were filed on	O 19 and assigned
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 "LLLC."
Enter new principal offices address, if applicable:	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)	
Also, update the mailing address to 1314 East Las olas Blcvd, Principal Address to: 1020 Se 5 th Street, Fort Lauderdale.	, #1111 Fort Lauderdale FL 33301
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our registered agent and/or the new registered office address here:	ecords, enter the name of the new
	PIVCL#III address Florida 333D 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 or removed to	Authorized Person(s) authorized to ma from our records:	anage, enter the title, name, and address of each p	erson being added
MGR = MR $AMBR = AR$	anager uthorized Member		
<u>Title</u> MG 12_	Name Ortsac Marcegament	L'Address 1314 Elas Olas Blud III) Ff. (audordala FL333C	Type of Action Add
	Brandon Castro		□ Change □ Add
			Remove
46RM ——	Catro-Chesney Priscilla		Add
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neffective date is list te: If the date ins	her than the date of filing ed, the date must be specific and erted in this block does not m date on the Department of So	cannot be prior to date neet the applicable st	of filing or more than statutory filing require	(optional) 0 days after filing.) Pursuar ments, this date will not	nt to 605.020° be listed as
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Page 3 of 3

Filing Fee: \$25.00