

L19000 247978

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

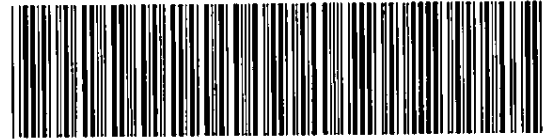
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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100405521671

W23-73886

LLC N/C & Amend

03/31/20--01023--001 **25.00

FILED
2023 JUL 28 AM 8:27
CLERK OF COURT
JUL 28 2023

A. RAMSEY
JUL 31 2023

X 00789, 00641, 00524, 00671



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 23, 2023

ANA MARIA ANGULO
LAW OFFICES OF ANA MARIA ANGULO
5975 SUNSET DRIVE, SUITE 503
SOUTH MIAMI, FL 33143

SUBJECT: CARLOS DIAZ ARCHITECTURE, LLC
Ref. Number: L19000247978

We have received your document for CARLOS DIAZ ARCHITECTURE, 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):

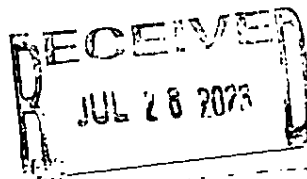
✓ The form that you submitted is incorrect. It is for a foreign (out of state) limited liability company and your entity is a Florida limited liability company. I have enclosed the correct form.

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.

Annette Ramsey
OPS

Letter Number: 923A00011784



COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CARLOS DIAZ ARCHITECTURE, 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:

ANA MARIA ANGULO
Name of Person
LAW OFFICES OF ANA MARIA ANGULO
Firm/Company
5975 Sunset Drive, Suite 503
Address
South Miami, FL 33143
City/State and Zip Code
annie@angulolaw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ana Maria Angulo	305	567-0305
Name of Person	Area Code	Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION FILED
OF**

2023 JUL 28 AM 8:27

CARLOS DIAZ ARCHITECTURE, LLC

(Name of the Limited Liability Company as it now appears on our records.) OF STATE
(A Florida Limited Liability Company) L. TASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 10/2/2019 and assigned
Florida document number L19000247978.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

CARLOS DIAZ ARCHITECTURE + INTERIOR DESIGN LLC

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)

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 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:

Enter Florida street address

_____, **Florida** _____
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

[illegible]

[illegible]

(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.

Lusana Diaz
Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00