## 119000286990

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## **COVER LETTER**

Registration Section Division of Corporations

:O:

	DLLINS 4003 LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of	of Amendment and fec(s) are sub	mitted for filing.	
Please return all corresp	he following amount:  \$\Bigsize \$30.00 \text{ Filing Fee & } \Bigsize \$55.00 \text{ Filing Fee & } \Bigsize \$60.00 \text{ Filing Fee.} \\ Certificate of Status & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)  \$\text{Street Address:} \text{ Street Address:} \text{ Street Address:}		
		Ų	
		Name of Person	
	SOFIA POWELL-COSIO	PA	
		Firm/Company	<del></del>
	1900 CORAL WAY		
		Address	
	MIAMI. FLOIRDA 33129		
	<del></del> -		<del></del>
	WILLY@SOFIAPCLAW.0	•	
	E-mail address: (	Name of Limited Liability Company  Iment and fee(s) are submitted for filing.  Perconcerning this matter to the following:  Name of Person  Firm/Company  Ou CORAL WAY  Address  AMI, FLOIRDA 33129  City/State and Zip Code  LLY@SOFIAPCLAW.COM  E-mail address: (to be used for future annual report notification)  ing this matter, please call:  at (	
or further information	concerning this matter, please c	all:	
WILLY GARCIA			
Name	of Person	Area Code Daytii	me Telephone Number
Enclosed is a check for	the following amount:		
□ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Mailing Addr Registration Division of P.O. Box 63 Tallahassee	Section Corporations 327	Registration Solution of Co The Centre of	orporations Tallahassee oe Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

17121 COLLINS 4003 LLC	
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(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 November 18, 2019 and assigned florida document number <u>L19000286990</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 17121 COLLINS AVE 4003 LLC 'he 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) 3. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address \_. Florida \_ City New Registered Agent's Signature, if changing Registered Agent: ' 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 iccept 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>	Address	Type of Action
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			□Remove
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ecord specifies a delayed effective as filed.	date, but not an ef	fective time,	at 12:01 a.m. o	n the earlier of	: (b) The 90th d	ay after the
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