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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: CUrated Events Miami LC 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:
Rachel Perez Name of Person
CURATED EVENTS MIAMI, UC.
14955 SW 49 Lane, #E
Miami, FL 33185 City/State and Zip Code
Yaunel E. aurated events mi ami. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Rachel Perez at (700) 409-9963 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \tag{ \text{ \$55.00 Filing Fee & 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 OF

000.	nts Miami, L			
(Name of the Limited Liability (A Florida Li	Company as it now appears on imited Liability Company)	our records,)		_
The Articles of Organization for this Limited Liability Con Florida document number <u>L19000300372</u>	npany were filed on 12	10/2019	and	assigned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	d liability company here:			
he new name must be distinguishable and contain the words "Limited	d Liability Company," the design	nation "LLC" or the ab	breviation	ı"L.L.C."
Enter new principal offices address, if applicable:		·····		
Principal office address MUST BE A STREET ADDRES	<u> </u>		 	
inter new mailing address, if applicable:		7 SE	2020 FE	
Mailing address MAY BE A POST OFFICE BOX)	·		- 22 -	
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		11 6	<u>∴</u> 2	0
. If amending the registered agent and/or registered o gent and/or the new registered office address here:	ffice address on our recor	rds, <u>enter the nam</u>	e of the	new register
Name of New Registered Agent:				
New Registered Office Address:		·		
	Enter Florida street address			
	City	, Florida	Zip Co	xle
	- "*			

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 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
AP	Justo L. Perez	14955 SW 49 Lane, #E	□ Add
		Miami, FL 33185	FRemove
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ectiv	ve date, if other than the date of filing: (optional)
effe	ctive 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 605.024 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a
	ent's effective date on the Department of State's records.
cora s file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after thed.
ed (January 27th . 2020.
	Dog. M
	Signature of a member or authorized representative of a member
	David A. Davida
	Rachel Perez Typed or printed name of signee