

L20000005096

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

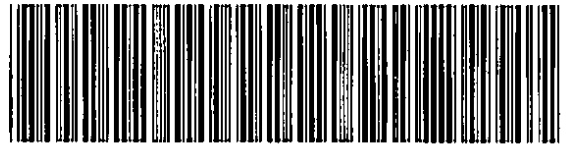
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SEP 25 2020

S. YOUNG

CLERK OF SUPERIOR COURT
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2020 AUG -7 AM 8:23

FILED

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Four Walls Homebuilders and Rental Properties, 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:

Veronica Lacayo

Name of Person

Tejada Lacayo, P.A.

Firm/Company

8950 SW 74th Ct., Suite 2201

Address

Miami, FL 33156

City/State and Zip Code

veronica@tlattorneys.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Veronica Lacayo

305

767-2977

at (_____) _____

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

FILED
2020 AUG - 7 AM 8:23
and assigned

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Florida document number L20000005096

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 "L.L.C."

11027 SW 78 Ct.

Miami, FL 33156

11027 SW 78 Ct.

Miami, FL 33156

Zip Code

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.

8/1/70 _____

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00