K20 0000 35Z18

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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02/25/21--01620--025 **25.00



COVER LETTER

Division of Co			ø.		
Best Partne	ers Realty Group LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
	ondence concerning this matter				
	Juan Fernandez				
		Name of Person			
	Best Partners Realty Group	5 LLC			
	Firm/Company				
	14310 SW 8 St# 942253				
		Address			
	Miami Fl 33194				
		City/State and Zip Code			
	chinof1125@gmail.com	to be used for future annual repor	t natification)		
For further information	concerning this matter, please of	·	i storrife actoris		
	temeering this matter, prease co		19.		
Juan Fernandez		at ()	rytime Telephone Number		
Name c	of Person	Area Code De	rytime Telephone Number		
Enclosed is a check for t	he following amount:				
\$25.00 Filing Fee	F 330.00 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 Addre		Street Address			
Registration Section Division of Corporations		Registration Section Division of Corporations			
P.O. Box 6327		The Centre of Tallahassee			

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Best Partners Realty Group LLC				
(Name of the Lim	<u>ited Liability Comp</u> (A Florida Limited	any as it now appears Liability Company)	on our records.)	
The Articles of Organization for this Limited I Florida document number L20000035218	.iability Company	were filed on 01/2	9/2020	and assigned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited lial	oility company her	<u>e</u> :	
none				
The new name must be distinguishable and contain the	words "Limited Liab	ility Company," the des	ignation "LLC" or the a	obreviation "L.L.C."
Enter new principal offices address, if applicable:		none		
(Principal office address MUST BE A STRE.	ET ADDRESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)		none		
				
B. If amending the registered agent and/or agent and/or the new registered office address. Name of New Registered Agent:		address on our rec	ords, <u>enter the nan</u>	ne of the new registered
-				1
New Registered Office Address:		Enter Floria	la street address	<u></u>
	, Florida			
		Cin	1 107 1014	Zip Code .
New Registered Agent's Signature, if changing	Registered Agent	Ĺ		
I hereby accept the appointment as register provisions of all statutes relative to the prop accept the obligations of my position as reg being filed to merely reflect a change in the company has been notified in writing of this	per and complete istered agent as registered office	performance of n provided for in Cl	ny duties, and Lam _, napter 605, F.S. Or,	tamiliar with and if this document is
being filed to merely reflect a change in the	registered office			

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Juan Fernandez	14310 SW 8 St #942253 Miami Fl 33194	■Add
			□Remove
			Change
MGR Julia Castano	Julia Castano	14310 SW 8 St # 942253 Miami Fl 33194	= Add
			□Remove
			[]Change
			□Add
			□Remove
			□Change
			🗀 Add
			□Remove
			☐ Change
			□ Add
			□Remove
			□Add
			□Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) NOTE. E. Effective date, if other than the date of filing: 02/17/2021 (optional)
(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) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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. Dated Signature of a member or authorized representative of a member

Filing Fee: \$25.00