## K20000054345

(Re	questor's Name)	)
(Ade	dress)	<del></del>
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(Cit	y/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Na	me)
(Doc	cument Number	)
Certified Copies	Certificate	s of Status
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Special Instructions to I	Filing Officer:	
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		7/20/21
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## **COVER LETTER**

	Division of Cor			a .
		NE VILLAS 503, LLC		
SUBJEC	CT:	Name of Limi	ted Liability Company	
ren I		the state of the (a) are sub-	arite at Car Filing	
		Amendment and fee(s) are sub-		
Please re	turn all correspo	ondence concerning this matter t	to the following:	
		Jorge S. Kuperman		
			Name of Person	
			Firm/Company	
		137 Giralda Avenue		
			Address	
		Coral Gables, Florida 3313	4	
			City/State and Zip Code	<del>.</del>
		j.kuperman@jskarchitectura	lgroup.com to be used for future annual report it	otification)
For furth	er information of	concerning this matter, please ea		
Jorge S.	Kuperman		305 448-1986	
	Name (	of Person	at () Area Code Days	time Telephone Number
Enclosed	d is a check for t	he following amount:		
□ \$25.	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 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 Division of C		Registration : Division of C	
	DIVISION OF C	•	The Centre of	•

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

21 JUH 21 AH 10: 46

KEYSTONE VILLAS 503, LLC

(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 Con	enpany were filed on 02/17/2020 and assigned
Florida document number 1.20000054345	
This amendment is submitted to amend the following:	
1. If an and in a name anten the new name of the limite	od liability company haras
A. If amending name, enter the new name of the limite	а навину сопрану неге.
The new name must be distinguishable and contain the words "Limited	ed 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 ADDRE	<u></u>
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
agent and/or the new registered office address here:	office address on our records, <u>enter the name of the new registered</u>
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 /	
I hereby accept the appointment as registered agent an provisions of all statutes relative to the proper and con accept the obligations of my position as registered age	nd agree to act in this capacity. I further agree to comply with the implete performance of my duties, and I am familiar with and ent as provided for in Chapter 605, F.S. Or, if this document is office address, I hereby confirm that the limited liability
	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 AND THE STATE OF A STATE OF or removed from our records:

MGR = Manager

AMBR = Authorized Member

21 JUN 21 原10:46

<u>Title</u>	Name	Address	Type of Action
MBR	Jorge S. Kuperman	137 Girakla Avenue	🗀 Add
		Coral Gables, Florida 33134	■Remove
			□Change
MBR	Jorge S.Kuperman Revocable Trust	137 Giralda Avenue	■Add
		Coral Gables, Florida 33134	□Remove
			☐ Change
MGR	Jorge S. Kuperman	137 Giralda Avenue	
		Coral Gables, Florida 33134	□Remove
			☐ Change
			□Add
			□Remove
			□Change
			🗀 Add
			□Remove
			□ Change
			🗆 Add
			□Remove
			Change

		on, enter change(s) here: (Attack additional sheets, if necessary.)
		21 JUN 21 AN 10: 46
		<del></del>
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E <mark>ffective d</mark> fan effective	ate, if other than the da	ate of filing: (optional) e specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3
Note: If the	e date inserted in this block	k does not meet the applicable statutory filing requirements, this date will not be listed as the artment of State's records.
ocument s	effective date on the Depa	arthenrol state s records.
	cifies a delayed effective d	date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
d is filed.		
No. of	June 3	2021
raicd	June 3	
		1/4m
_		
-	Sig	gnature of a member or authorized representative of a member

Filing Fee: \$25.00