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COVER LETTER

	stration Sect sion of Corpo						
	4084 BONIT.	A LLC		•			
SUBJECT: _	·	Name of Lin	nited Liability Company				
The enclosed a	Articles of A	mendment and fee(s) are sub	omitted for filing.				
Please return a	all correspond	lence concerning this matter	to the following:				
		ALINE DARMOUNI					
			Name of Person				
		EXCO US ATRIUM					
			Firm/Company	·			
		1200 BRICKELL AVENU	JE - SUITE 1960				
			Address				
		MIAMI FL 33131					
			City/State and Zip Code				
		office@excous.com	to be used for future annual report no	Nifaction)			
T &	·			offication)			
		scerning this matter, please c					
ALINE DARMOUNI			305 600 4405 at ()				
	Name of F	Person	Area Code Dayti	me Telephone Number			
Enclosed is a c	check for the	following amount:					
■ \$25.00 Fit	ling 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)			
Regi	ing Address: istration Se sion of Cor		Street Address: Registration S Division of Co				
P.O.	Box 6327	•	The Centre of Tallahassee				
Talla	ahassee, FL	. 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

4084 BONITA LLC

2013 S- 11 ATTO: 43

(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 $\frac{06/12/2020}{1}$ and assigned Florida document number 1.20000071639 This amendment is submitted to amend the following: 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." 1200 BRICKELL AVENUE - SUITE 1960 Enter new principal offices address, if applicable: MIAMI FL - 33131 (Principal office address MUST BE A STREET ADDRESS) 1200 BRICKELL AVENUE - SUITE 1960 Enter new mailing address, if applicable: MIAMI FL - 33131 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: EXCO US ATRIUM Name of New Registered Agent: 1200 BRICKELL AVENUE - SUITE 1960 New Registered Office Address: Enter Florida street address , Florida 33131 Zip Code MIAMI

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 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 Codd St. 14 ACIO: 63	Type of Action
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Effective date, if other than the If an effective date is listed, the date mus Note: If the date inserted in this bl document's effective date on the D	ock does not a	meet the appli	icable statutory	g or more than 90 y filing requirer	(optio days after t nents, this	nal) iling.) Pursuant to 695. date will not be liste	.0207 (ed as tl
e record specifies a delayed effectiv rd is filed.	e date, but no	t an effective	time, at 12:01	a.m. on the ear	lier of: (b)	The 90th day after	the
Dated SEPTEMBER 8th		2020	·				
				ntative of a memb			