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Florida Department of State
Division of Corporations
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To: Division of Corporations
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
COOPER SQUARE PLAZA 105, LLC

Certificate of Status	0
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Page Count	06
Estimated Charge	\$25.00

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2021 JUL 15 PM 3:09
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: COOPER SQUARE PLAZA 105, 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:

JUAN CARLOS BAZANTES
Name of Person
COOPER SQUARE PLAZA 105, LLC
Firm/Company
14401 sw 79th avenue
Address
palmetto bay, FL 33158
City/State and Zip Code
jcb@ib-groupusa.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JUAN CARLOS BAZANTES at 678 760-1785
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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COOPER SQUARE PLAZA 105, 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 Company were filed on 03/13/2020 and assigned Florida document number L20000081271

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and contain the words "Limited 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 ADDRESS)

N/A

Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)

N/A

FILED 2021 JUL 15 PM 3:08 TALLAHASSEE, FLORIDA

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:

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 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

