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| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| Special Instructions to Filing Officer: |
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| | Registration S Division of Co | | | • |
|-----------------|--------------------------------------|--|--|---|
| C1:15 11:4: | | o Miami LLC | | |
| SUBJEC | .1: | Name of Lim | ited Liability Company | |
| The encle | osed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please ret | turn all corresp | ondence concerning this matter | to the following: | |
| | | Steven B. Greenfield | | |
| | | | Name of Person | |
| | | Greenfield Law Group | | |
| | | | Firm/Company | |
| | | 6111 Broken Sound Parkw | ray, NW, Suite 350 | |
| | | | Address | |
| | | Boca Raton, FL 33487 | | |
| | | Sgreenfield@florid-legal.nc | City/State and Zip Code of the be used for future annual repo | |
| For furthe | er information | eoncerning this matter, please c | · | n nouncation) |
| Steven B | . Greenfield | | 561 288-89 | |
| | Name | of Person | at () Area Code I | Daytime Telephone Number |
| Enclosed | is a check for | the following amount: | | |
| ■ \$25.0 | 00 Filing Fee | ☐ \$30,00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed | S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | <u>Mailing Addre</u> Registration | | <u>Street Addre</u> Registratio | |
| | Division of C | Corporations | Division o | f Corporations |
| | P.O. Box 63 | 27 | The Centre | of Tallahassee |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF MALO:

20 PH 5: 11

| Gaton Negro Miami LLC | 4 | | |
|---|---|---------------------------|--|
| (<u>Name of the Limited</u>) (A | Liability Company as it now appea Florida Limited Liability Company) | rs on our records.) | <u>. </u> |
| The Articles of Organization for this Limited Liab Florida document number 1.20000178242 | ility Company were filed on 6/ | 25/2020 | and assigned |
| This amendment is submitted to amend the following | ing: | | |
| A. If amending name, <u>enter the new name of th</u> | e limited liability company h | ere: | |
| The new name most be distinguishable and contain the word | s "Limited Liability Company." the | designation "LLC" or t | the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable | le: | ····· | ······ |
| (Principal office address MUST BE A STREET A | (DDRESS) | | |
| | | | |
| Enter new mailing address, if applicable: | | | |
| (Mailing address MAY BE A POST OFFICE BO | <u></u> | | |
| | | | |
| B. If amending the registered agent and/or regi agent and/or the new registered office address b | | records, <u>enter the</u> | name of the new registered |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | | | |
| | Enter Fle | mida street address | |
| | | Florid | a Zip Code |
| | Cuy | | 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. Thereby 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

| Title | Name | Address 421 SE 20 PH 5: 11 | Type of Action |
|-------|-------------------------------|---|---------------------------|
| MGR | Sevilla Serna, Maria Magdalen | 1541 Brickell Ave, Suite A-3902, Miami, Fl. 33129 | □Add |
| | | | Remove |
| | | | □Change |
| MGR | Gilberto Galvez | 1541 Brickell Ave, Suite A-3902, Miami, FL 33129 | = Add |
| | | | □Remove |
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| Note: If the date | f other than the date of filing:s listed, the date must be specific and cannot be inserted in this block does not meet the a tive date on the Department of State's rec | applicable statutory filing rec | (optional) han 90 days after filing.) Pursuant to 605,020 quirements, this date will not be listed a |
| If the record specifies record is filed. | a delayed effective date, but not an effect | tive time, at 12:01 a.m. on th | ne earlier of: (b) The 90th day after th |
| Dated | <u> </u> | | Jan |
| | et an energy et an entre | r authorized representative or a | member |

Typed or printed name of signee