LZ0000178746

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COVER LETTER

TO:

Registration Section

Division of Co	rporations					
789 Crando	on Blvd, Unit 206, LLC					
SUBJECT:	Name of Lin	ited Liability Company	,			
		Name of Limited Liability Company and fee(s) are submitted for filing. crining this matter to the following: Chmachtenberg Name of Person Chmachtenberg P.A. Firm/Company Illier Blvd. #1001 Address and Florida 34145 City/State and Zip Code achtenberg-law.com E-mail address: (to be used for future annual report notification) s matter, please call: at (
Please return all correspo	ondence concerning this matter	to the following:				
	Lee C. Schmachtenberg					
		Name of Person				
	Lee C. Schmachtenberg P.	Λ.				
		Firm/Company				
	730 S Collier Blvd. #1001					
	Marco Island Florida 3414					
	lee@schmachtenberg-law.c	· · · · · · · · · · · · · · · · · · ·				
			otification)			
For further information c	oncerning this matter, please c	ali:				
Lee Schmachtenberg		305- 494-4122				
Name o	f Person	Area Code Dayt	ime Telephone Number			
Enclosed is a check for the	ne following amount:					
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy			
<u>Mailing Addres</u> Registration S			Section			
Division of Corporations P.O. Box 6327		Division of Co	Division of Corporations The Centre of Tallahassee			
Tallahassee, FL 32314			2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

789 Crandon Blvd. Unit 206, 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 $\frac{06/25/2020}{1}$ _____ and assigned Florida document number L200001787746 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." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (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: Name of New Registered Agent: New Registered Office Address: Enter Florida street address _, Florida __ City

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 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>	Name	<u>Address</u>	Type of Action
MGR	Alejandra Gonzales	change to: Maria Alejandra Gonzales Doria Medina	□Add
		545 Glenridge Rd.	□Remove
		Key Biscayne, FL 33149	7 a
			□Add
			□Remove
		·	□ Change
			□ Add
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ffective date, if other than an effective date is listed, the date ofte: If the date inserted in the	the date of filing	g:		(optio	nai)	
ote: If the date inserted in the ocument's effective date on the	O DIOCE GOES HULLI	IKCEL IIIC AMDIICAN	date of filing or mor le statutory filing	e than 90 days after i requirements, this	iling.) Pursuant to 605 date will not be liste	.0207 ed as
record enecifies a deleved -00-	ctive date, but not	an effective time	s, at 12:01 a.m. on	the earlier of: (b)	The 90th day after	the
is filed.						
ated May 10,		2021				
May 10	lejanti	a An	mall		Ina, Manag	

Filing Fee: \$25.00