# L20000 235817

Office Use Only



200350935072

08/25/20--01028--029 \*\*25.00

220 AT 25 FT 2: F2

· NS

OCT 0 9 2020

### **COVER LETTER**

| TO: Registration of Division of | n Section<br>Corporations |                                |  |                                  | _               |
|---------------------------------|---------------------------|--------------------------------|--|----------------------------------|-----------------|
| SUBJECT:                        | J& N                      | Deard<br>Name of Limit         | tade LLC ed Liability Company                                    | <del></del>                      |                 |
| The enclosed Article            | es of Amendment :         | and fee(s) are subn            | nitted for filing.   |                                  |                 |
| Please return all con           | espondence conce          | rning this matter to           | o the following:   |                                  |                 |
|                                 |                           |                                | Costa-De Ar<br>Name of Person<br>2 Andrade L<br>Firm/Company     |                                  | (PRIESS         |
|                                 | _ 88                      | 10 Carol                       | ina Qu-l   |                                  |                 |
|                                 | <u> Fo</u>                | + Land<br>Costa                | erdale Fl<br>City/State and Zip Code<br>Naneurand (              | 33712                            | o @ graid. Con  |
|                                 |                           | E-mail address: (to            | be used for future annual report                                 | notification)                    |                 |
| For further informati           | on concerning this        | matter, please cal             | l:   |                                  |                 |
| Nancy (                         | Custa-De<br>me of Person  | Andrade                        | at ( <u>508</u> ) <u>68</u><br>Area Code Day                     | S-7743<br>etime Telephone Number | r               |
| Enclosed is a check             | for the following a       | mount;                         |  |                                  |                 |
| ⊕\$25.00 Filing Fe              |                           | Filing Fee &<br>cate of Status | S55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certified                        | ite of Status & |
|                                 |                           |                                |  |                                  |                 |

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2000 25 70 2:53

| ( <u>Name of the Limited Liability</u><br>(A Florida   | ty Company as it now appears on our records.) a Limited Liability Company)  |  |  |  |  |  |  |
|--|---|--|--|--|--|--|--|
|  |   |  |  |  |  |  |  |
| The Articles of Organization for this Limited Liability Company were filed on SEN Dadrade LLC and assigned |   |  |  |  |  |  |  |
| Florida document number <u>L 20000 23581</u>   | <u></u>   |  |  |  |  |  |  |
| This amendment is submitted to amend the following:  |   |  |  |  |  |  |  |
| A. If amending name, enter the new name of the limit   | ited liability company here:  |  |  |  |  |  |  |
| The new name must be distinguishable and contain the words "Limit  | nited 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 ADDR.   | RESS)   |  |  |  |  |  |  |
|  |   |  |  |  |  |  |  |
|  |   |  |  |  |  |  |  |
| Enter new mailing address, if applicable:  |   |  |  |  |  |  |  |
| Mailing address MAY BE A POST OFFICE BOX)  |   |  |  |  |  |  |  |
|  |   |  |  |  |  |  |  |
| B. If amending the registered agent and/or registered  | d office address on our records, enter the name of the new reg  |  |  |  |  |  |  |
| agent and/or the new registered office address here:   | ,   |  |  |  |  |  |  |
|  |   |  |  |  |  |  |  |
| Name of New Registered Agent:  |   |  |  |  |  |  |  |
| New Registered Office Address:   |   |  |  |  |  |  |  |
|  | Enter Florida street address  |  |  |  |  |  |  |
|  | , Florida   |  |  |  |  |  |  |
| New Registered Agent's Signature, if changing Registered   |   |  |  |  |  |  |  |
|  |   |  |  |  |  |  |  |
| provisions of all statutes relative to the proper and co   | and agree to act in this capacity. I further agree to comply we complete performance of my duties, and I am familiar with an agent as provided for in Chapter 605, F.S. Or, if this documen |  |  |  |  |  |  |

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> | Name                   | Address 1-2011 - 25 Fit 2: 53           | Type of Action             |
|--------------|------------------------|---|----------------------------|
| MGR          | JOSE DEANDRADE         | 820 Carolina ave Fort La                | iderdole, Fl<br>Ladd 33312 |
|              |                        |   | _ KRemove                  |
|              |                        |   | □Change                    |
| MGR          | Marcy Cista- De Andrad | e Sao Carolina ave. Fort Lauderdale, FL | _ Xad                      |
|              | ·                      | Fort Landerdale, FL                     | _ □Remove                  |
|              |                        |   | _ □Change                  |
|              |                        |   | _ □Add                     |
|              |                        |   | □Remove                    |
|              |                        |   | _ □Change                  |
|              |                        | •                                       | _ 🗆 Add                    |
|              |                        |   | _ □Remove                  |
|              |                        |   | _ □Change                  |
|              |                        |   | _ □Add                     |
|              |                        |   | _ □Remove                  |
|              |                        |   | _ □Change                  |
|              |                        |   | _ □Add                     |
|              |                        |   | _ □Remove                  |
|              |                        |   | □Change                    |

|                      |  |                |               |                 |                |            |              | 2=          | FU 2       | : 43   |
|----------------------|--|----------------|---------------|-----------------|----------------|------------|--------------|-------------|------------|--------|
|                      |  |                |               | <del></del>     | <del></del>    |            |              | ·           |            | 5      |
|                      |  |                |               |                 |                |            |              | ··· - · · · |            | -      |
|                      |  |                | <del></del>   |                 |                |            |              | ·           | ···        | -      |
|                      |  |                |               |                 | <del> </del>   |            |              |             |            | _      |
|                      |  |                |               |                 |                |            |              |             |            | _      |
|                      |  |                |               |                 |                |            |              | _           |            | _      |
|                      |  |                |               |                 |                |            |              |             |            | -      |
|                      |  |                |               |                 |                | •          |              |             |            | _      |
|                      |  |                |               |                 | <del>-</del>   |            |              |             |            | _      |
|                      |  |                |               |                 |                |            |              |             |            | -      |
|                      |  |                |               |                 | <del>-</del>   |            |              |             |            | _      |
|                      |  |                |               |                 |                |            |              |             |            |        |
|                      |  |                |               |                 |                |            |              |             |            |        |
| •                    |  |                | <del></del>   |                 |                |            |              |             |            | -      |
|                      |  |                |               |                 |                | . na 4 -   | ·            |             |            | -      |
|                      |  |                | -             |                 |                |            |              |             |            | -      |
|                      |  |                |               |                 |                |            |              |             |            | _      |
| in effective date is | other than the d                           | e specific and | cannot be pri | or to date of f | iling or more: |            | after filing | g.) Pursi   |            |        |
|                      | nserted in this bloc<br>ve date on the Dep |                |               |                 | tory filing re | quirements | , this dat   | e will n    | ot be lis  | ted as |
| is filed.            | delayed effective                          |                |               |                 |                |            | tì (b) - T   | he 90th     | ı day afte | er the |
| ned Auc              | gust 19<br>Fine<br>De Andra                |                | <u>202</u>    | <u>10</u> .     |                |            |              |             |            |        |
|                      |  | <i>f</i> 1     | 1.            | 1/              |                |            |              |             |            |        |

Filing Fee: \$25.00