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## **COVER LETTER**

TO: Registration Se Division of Con			
	PERTY SOLUTIONS LEC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	PILAR ULLOA		
		Name of Person	
	ONE PROPERTY SOLU	TIONS LLC	
		Firm/Company	
	7825 SW 32 TER		
		Address	
	MIAMI FL 33155		
		City/State and Zip Code	····
	PILARONEPERMIT@GM		
For further information of	E-mail address: ( concerning this matter, please c	to be used for future annual report not all:	ification)
PILAR ULLOA		305 898-9884 at ()	
Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	he 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 Addres Registration S		Street Address:	ection
Division of C		Registration Se Division of Co	
P.O. Box 632	.7	The Centre of	-
Tallahassee, l	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ONE PROPERTY SOLUTIONS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Florida document number L20000269838	<u> </u>		
This amendment is submitted to amend the fo	Howing:		
A. If amending name, enter the new name	of the limited liab	ility company here:	
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		5072 NW 74TH AVE MIAMI FL	
(Principal office address MUST BE A STREET ADDRESS)			5023
		<del> </del>	82
			29
Enter new mailing address, if applicable:		7825 SW 32 TER_MIAMI FL 33	
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>
		**************************************	<u>~~~~</u>
B. If amending the registered agent and/or tgent and/or the new registered office addr  Name of New Registered Agent:			name of the new register
New Registered Office Address:	5072 NW 74TI	I AVE	
		Enter Florida street address	
	2474241	***	da <u>33166</u>
	MIAMI	, Florid	Zip Code

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	Type of Action
MGR	PILAR ULLOA	5072 NW 74 AVE MIAMI FL 33166	□Add
			□Remove
			<b>≡</b> Change
OWNER PILAR ULLOA	7825 SW 32 TER MIAMI FL 33155		
			□Remove
			□Change
<del></del>			□Add
			□Remove
		□Change	
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			□ Change

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te: If the date inserted in thi	must be specific and cannot be prior to	date of filing or more than 90 days after old statutory filing requirements, th	ional) er filing.) Pursuant to 605.020 is date will not be listed a
cord specifies a delayed effe s filed.	ctive date, but not an effective tim	e, at 12:01 a.m. on the earlier of: (	b) The 90th day after the
09/24 led	2020		
		1 0	

Typed or printed name of signee