Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BUSINESS ACCOUNTING PROFESSIONALS CORP

Account Number : I20190000020 Phone : (786)953-7449 : (786)953-7450 Fax Number

\*\*Enter the email address for this business entity to be used for future 

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 305 RENTALS & SALES REALTY LLC

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Tallahassee, FL 32314

## **COVER LETTER**

	Division of Cor			124	•
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SUBJEC		Name of Lim	ited Liability Company		-
The encl	osed Articles of	Amendment and fee(s) are sub-	mitted for filing		
		ondence concerning this matter			
riease te	turn an correspo	orkience correcting this matter	to the following.		
		ESPERANZA MENDOZ	A		
			Name of Person	<del></del>	
		305 RENTLS & SLES R	EALTY LLC		
			Firm/Company		
		7600 WEST 20TH AVEN	NUE UNIT 208		
			Address		
		HILAEAH, FL. 33016			
			City/State and Zip Code		<del></del>
		MIAMINR@GMAIL.COM	to be used for future annual report no	attlestion)	_
For furth	ner information (	concerning this matter, please of	·	All Cadon -	
ESPER	ANZA MENDO	DZA	305 494-5423		
	Name	of Person	Area Code Dayt:	me Telephone Nu	mber
Enclosed	t is a check for t	the following amount:			
<b>■ \$</b> 25.	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Cert Cert	00 Filing Fee, ificate of Status & ified Copy tional copy is enclosed)
	Mailing Addre		Street Address: Registration S	ection	
	Division of C P.O. Box 63	Corporations	Division of Co The Centre of	•	
	Tallahassee,		2415 N. Moni		te 810

Tallahassee, FL 32303

19-Nov-2020 15:39 Unknown 7869537450 p.3

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our reco (A Florida Limited Liability Company)  The Articles of Organization for this Limited Liability Company were filed on  O1/17/2020  Florida document number L20000314898  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 "LI 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, enterprincipal and/or the new registered office address here:	
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 "LI 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	and assigned
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	
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	
(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	
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	2070
(Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter	2020 V .:
(Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter	9 177
B. If amending the registered agent and/or registered office address on our records, ente	<i>م</i> م
	37
	r the name of the new regis
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida street addi	ess
, ]	lorida 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 heing 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.

19-Nov-2020 15:40 Unknown 7869537450 p.4

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
AMBR	REYNER LABRADA	7600 WEST 20TH AVE UNIT 218	
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ecord specifies a delayed effective date, but not is filed.	an effective time, at I	2:01 a.m. on the earlie	er of: (b) Th	e 90th day after	the
NCVEMBER 17	2020				
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Filing Fee: \$25.00