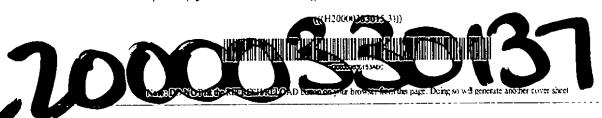
пютоа фераптиент от State

Division of Corporations Electronic Filing Cover Sheet

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



Division of Computations Tax Number : (650)617-6283

Paula.

Approximation of Alphodox GARROSS, 1.A. Science further a 10002000607

. 4301)158+2595 . 4305)445-9673 jes Humber

ffirths the email sadress for this cusiness entity to be used for future around report rapidings. Enter only one email address flecte **

pilar@alonso-garcia.net

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ANAD PROPERTIES IV. LLC

Certificate of Suns	1
Cerufied Copy	0
Page Court	01
Eximised Charge	\$30.00

Electronic Filing Menu - Corporate Filing Menu

Help

AM 10: 16

Registration Section

Tallahassee, FL 32314

TO:

COVER LETTER

Div	ision of Cor	porations		
		OPERTIES IV , LLC		·
SUBJECT:		Name of Limit	ed Liability Company	
The enclosed	d Articles of .	Amendment and fee(s) are subr	nitted for filing.	
		ndence concerning this matter t		
rease retur	ran concapo	indence concerning and maner.	o me rono mag.	
		MARIA PILAR ALONSO		
			Name of Person	
		ANAD PROPERTIES IV L	LC	
			Firm/Company	
		1308 SOROLLA AVE		
		***************************************	Address	
		CORAL GABLES, FL 331	34	
			City/State and Zip Code	
		PILAR@ALONSO-GARCI	A.COM o be used for future annual report not	theotion
				ticanon,
For further i	ntormation c	oncerning this matter, please ca		
MARIA PII	LAR ALONS		305 3101867 at () Area Code Daytin	
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is	a check for the	he following amount:		
□ \$25.00		■ \$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)
	ailing Addres		Street Address: Registration Se	ection
Di	vision of C	Corporations	Division of Co	rporations
P.(O. Box 633	27	The Centre of	Fallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ANAD PROPERTIES IV LLC					
(Name of the Limited Liah (A Flori	i <mark>lity Company as it n</mark> ida Limited Liability C	ow appears on our records.) Company)			
he Articles of Organization for this Limited Liability lorida document number L20000330137	Company were fil	ed on OCTOBER 19 2020	an	ıd assig	ned
his amendment is submitted to amend the following:					
. If amending name, enter the new name of the li	mited liability con	npany here:			
NA					
he new name must be distinguishable and contain the words "L	imited Liability Comp		ne abbreviati	on 25 L.	C."
nter new principal offices address, if applicable:		N/A	<u> </u>	20 NO	7
Principal office address MUST BE A STREET ADI	DRESS)		 	_ \	
	.			AM IO:	U
nter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)			171	9	
s. If amending the registered agent and/or register gent and/or the new registered office address here Name of New Registered Agent:	red office address e: N/A	on our records, <u>enter the </u>	name of th	<u>ne new</u>	register
New Registered Office Address:	<u> </u>	Enter Florida street address			
		, Florida	a		
	City	<u></u>	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, 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>	<u>Name</u>	Address	Type of Action
AMBR	DOMINGO ALONSO	1308 SOROLLA AVE	□ Add
		CORAL GABLES, FL 33134	■Remove
			□Change
			□Add
			Name of the state
			Change
			□ Add
			Change
			□Add
			□Remove
			☐ Change
			□Add
			🗀 Remove
			□Change

<u> </u>	-			
MARKET				, <u>.</u>
		-		
			***	2020
				2020 NOV
<u> </u>			53.5 60.75	-5
			- 89	
				<u>-</u>
			<u>. 76</u>	6
Effective date, if other than the date must b	ate of filing:	(op	otional)	
(If an effective date is listed, the date must b Note: If the date inserted in this bloc document's effective date on the Dept.	k does not meet the applicable	te of fitting or more than 90 days a statutory filing requirements,	this date will:	not be listed as
ne record specifies a delayed effective ord is filed.	date, but not an effective time, a	at 12:01 a.m. ол the earlier of	(b) The 90t	h day after the
Dated NOVEMBER 4	2020			
Dated	Just De	9		
		22		

Filing Fee: \$25.00

Typed or printed name of signee