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T. MATTHEWS MAR 2 4 2022

COVER LETTER

	Registration Se Division of Co		•				
SUBJEC	15600 SW	136 ST 2-201 LLC					
SUBJEC		Name of Lim	ited Liability Company				
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please reti	um all correspo	ondence concerning this matter	to the following:				
		MARIA JOSE GRANADA	OS GODOY				
			Name of Person				
		SimplyLegal					
			Firm-Company	tus &			
		20200 W. DIXIE HIGHW	20200 W. DIXIE HIGHWAY STE G17				
			Address				
		AVENTURA, FL 33180					
			City/State and Zip Code	Status &			
		mj@simplylegalgroup.com E-mail address: (to be used for future annual report notification)				
For furthe	r information o	oncerning this matter, please co					
		DOS GODOY	305 858.6208				
	Name o	f Person	at () Area Code Daytime Telephone Number				
Enclosed i	is a check for t	he following amount:					
\$25.00	0 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certificate of Statu Certified Copy (additional copy is enclosed)				
F E F	Aniling Address Registration (Division of C D.O. Box 632 Callahassee,	Section Corporations 27	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 22 FT 15 2:54 OF

15600 SW 136 ST 2-201 LLC		
(Name of the Limited Liabili (A Florida	Ity Company as It now appears on our sa Limited Liability Company)	records.)
The Articles of Organization for this Limited Liability C	Company were filed on 10/23/2020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	sited liability company here:	
The new name must be distinguishable and contain the words "Lim	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 ADDI	RESS)	······································
	 -	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our records, g	enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street	address
<u></u>		Florida
	City	Zıp Code
New Registered Agent's Signature, if changing Registere	ed Agent:	
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and c accept the obligations of my position as registered a being filed to merely reflect a change in the registere company has been notified in writing of this change.	complete performance of my duti- igent as provided for in Chapter ed office address. I hereby confit	es, and I am familiar with and 605, F.S. Or, if this document is

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	Altredo Gomes Oliveira Neto	13536 SW 144 TERRMIAMI, FL 33186	= Add
			□Remove
			□Change
			□Remove
			□Change
			🗆 Add
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ffective date, if other than the an effective date is listed, the date mus lote: If the date inserted in this blocument's effective date on the December 1.	ock does not meet	t the applicab	date of filing or mo le statutory filing	(option re than 90 days after for requirements, this	nal) iling.) Pursuant to 605.020 date will not be listed a
record specifies a delayed effective Lis filed.			e, at 12:01 a.m. o	n the earlier of: (b)	The 90th day after the
March 9th	Camle Va	2022			
	CamleVa	67			

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