LZO 000354493

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COVER LETTER

Registration Section Division of Corporations

TO:

SURIFCT:	Kr12i	a bonzaltz	Realty LL	· C *	
SUMMET	_	Name of Lim	ited Liability Company		
The enclosed	Articles of An	nendment and fee(s) are sub	mitted for filing.		
Please return a	ill correspond	ence concerning this matter	to the following:		
				1.4.5	
		LR121	Name of Person	<u>a 17 Z</u>	
			Name of Person		
			Firm/Company		
		14054	Prater Ct. Address		
			Address		
		Jacksor	WILL, FZ 32 City/State and Zip Code	224	
			City/State and Zip Code		0 633.00
		E-mail address: (1	e20 RedZUME	report notification)	Sup. Carri
For further inf	ormation con	cerning this matter, please ca		•	
		-		-00	7 2)
<u>K12121</u>	G byy	1201(2 erson	at (305)	S & Z - +5.	Vumber
	(value of 1)	oracon .	ruea code	payame receptione	runtzi
Enclosed is a	sheck for the	Collowing amount:			
,			□ \$55.00 PH: P 9	, <u> </u>	50 00 Pilian Pas
\$ \$25.00 Fil	ing ree	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is encl	losed) C	50.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)
Maili	ng Address:		Street Ad	dress:	
Regi	stration Sec		Registra	tion Section	
	sion of Cor Box 6327	porations		n of Corporations ntre of Tallahasse	
	ahassee, FL	32314		Monroe Street, S	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Krizia bonzalez	Realty, LLC	·	
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appears on our ability Company)	records.	
The Articles of Organization for this Limited Liability Company vi Florida document number <u>L2000354493</u> . This amendment is submitted to amend the following:	vere filed on	2010 and assigned	
A. If amending name, enter the new name of the limited liabil	ity company here:		
Krizia bunzaltz			
The new name must be distinguishable and contain the words "Limited Liabilit		on "LLC" or the abbreviation "L.L.C."	-
Enter new principal offices address, if applicable:	n/A	2021	_
(Principal office address MUST BE A STREET ADDRESS)		770	
	1.0	F I	
Enter new mailing address, if applicable:	- n/H		_
(Mailing address MAY BE A POST OFFICE BOX)		3.0	
			_
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	idress on our records,	enter the name of the new regist	lerec
Name of New Registered Agent:	n/A		_
New Registered Office Address:	nla		
New Registered Office Futuress.	Enter Florida street	t uddress	_
		Florida	
	City	Zip Code	
lew Registered Agent's Signature, if changing Registered Agent:			
hereby accept the appointment as registered agent and agree rovisions of all statutes relative to the proper and complete peccept the obligations of my position as registered agent as peeing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my dut rovided for in Chapter	ties, and I am familiar with and 605, F.S. Or, if this document i	

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>	<u>Address</u>	Type of Action
			□Add
			□Remove
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ctive date, if other than the date of filing:	(optional)
If the date inserted in this block does not meet the applicable s ment's effective date on the Department of State's records.	tatutory filing requirements, this date will not be liste
ord specifies a delayed effective date, but not an effective time, a filed.	t 12:01 a.m. on the earlier of: (b) The 90th day after
××	
d January 5, 2021.	
You in MI don	Mh (
Signatury of a member or authorized	renfesentarive of a member
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