K21000023167

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(Business Entity Name)
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T. MATTHEWS MAR - 8 2022

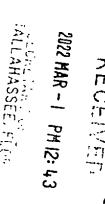


FLORIDA DEPARTMENT OF STATE Division of Corporations

November 12, 2021

ALEXIS B. DIAZ, ESQ 6303 BLUE LAGOON DRIVE, STE 390 MIAMI, FL 33126

SUBJECT: 109 GUERRERO LLC Ref. Number: L21000023167



We have received your document for 109 GUERRERO LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed in the document. We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tekayla T Matthews OPS

Letter Number: 921A00027474

COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Div	rision of Cor	porations		
~~ · · · · · · · · · · · · · · · · · ·		RERO LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Alexis B. Diaz, Esq.		
			Name of Person	
		Alexis Bucelo Diaz, PA		
			Firm/Company	
		6303 Blue Lagoon Drive.	Suite 390	
			Address	
		Miami, FL 33126		
		· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	
		adiaz@abd-pa.com		·
		E-mail address: 0	to be used for future annual report noti	ification)
or further in	nformation c	oncerning this matter, please ca	all:	
Alexis B. Di	iaz, Esq.		305 915-4693 at ()	
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a	check for th	ne following amount:		
■ \$25.00 F	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)
	iling Addres		<u>Street Address:</u> Registration Se	ection
	gistration S vision of C	section orporations	Division of Co	
), Box 632	•	The Centre of	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION. **OF**

22 17 7 - 1 - 27 12: 52

109 GUERRERO LLC		
(<u>Name of the Limited Liabili</u> (A Florid	ity Company as it now appears on our rec a Limited Liability Company)	ords.)
The Articles of Organization for this Limited Liability C	Company were filed on 01/08/2021	and assigned
Florida document number <u>L21000023167</u>	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "I	J.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	RESS)	<u></u>
Enter new mailing address, if applicable:	-	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	d office address on our records, <u>en</u>	ter the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ade	dress
		Florida
	City	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 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
MGRM	ERNESTO GUERRERO	12131 SW 97TH ST	□ Add
		MIAMI, FL 33186	■Remove
			□Change
MGRM		12131 SW 97TH ST	= Add
THE	ERNESTO A. GUERRERO LIVING	TRUST MIAMI, FL 33186	□Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			□Change

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Effective date, if other than the	date of filing:		(optio	nal)
f an effective date is listed, the date mus	st be specific and cannot be p	rior to date of filing or	nore than 90 days after t	iling.) Pursuant to 605.02
Note: If the date inserted in this blocument's effective date on the D	epartment of State's reco	rds.	ng requirements, tilis	date will not be used
			•	
record specifies a delayed effective	e date, but not an effective	e time, at 12:01 a.m	on the earlier of: (b)	The 90th day after th
d is filed.				
October 26	2021			
October 26		·		
-				
761	Signature of a member or a	uthorized representativ	e of a member	

 $\mathbb{Q}(\mathbf{x},\mathbf{x},\mathbf{x},\mathbf{x}) = \mathbf{x}(\mathbf{x},\mathbf{x}) + \mathbf{x}(\mathbf{x},\mathbf{x})$

Filing Fee: \$25.00