

L21000042363

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

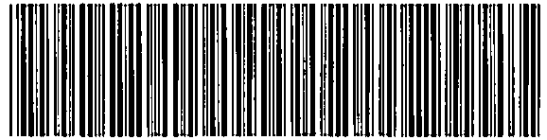
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

05/07/21  
TM

Office Use Only



100361958231

03/22/21--01018--027 \*\*25.00

FILED  
STATE  
DIVISION OF CORPORATION  
21 MAR 22 PM 3:27

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 300 SURFSIDE LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ARASH GOHARI

Name of Person

300 SURFSIDE LLC

Firm/Company

20803 BISCAYNE BOULEVARD, SUITE 405

Address

AVENTURA, FL 33180

City/State and Zip Code

sir.arash.gohari@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Arash Gohari

917

881-1500

at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 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)

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

21 MAR 22 PM 3: 27

(A Florida Limited Liability Company)

**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

FILED  
CLERK OF STATE  
DIVISION OF CORPORATIONS

<u>Title</u>	<u>Name</u>	<u>Address</u>	21 MAR 22 PM 3: 27	<u>Type of Action</u>
MGR	JOYA PROPERTY GROUP LLC	20803 BISCAYNE BOULEVARD, SUITE 405		<input checked="" type="checkbox"/> Add
		AVENTURA, FL 33180		<input type="checkbox"/> Remove
				<input type="checkbox"/> Change
AP	ARASH GOHARI	20803 BISCAYNE BOULEVARD, SUITE 405		<input type="checkbox"/> Add
		AVENTURA, FL 33180		<input checked="" type="checkbox"/> Remove
				<input type="checkbox"/> Change
AP	LEE COHEN	20803 BISCAYNE BOULEVARD, SUITE 405		<input type="checkbox"/> Add
		AVENTURA, FL 33180		<input checked="" type="checkbox"/> Remove
				<input type="checkbox"/> Change
				<input type="checkbox"/> Add
				<input type="checkbox"/> Remove
				<input type="checkbox"/> Change
				<input type="checkbox"/> Add
				<input type="checkbox"/> Remove
				<input type="checkbox"/> Change
				<input type="checkbox"/> Add
				<input type="checkbox"/> Remove
				<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

21 MAR 22 PM 3: 27

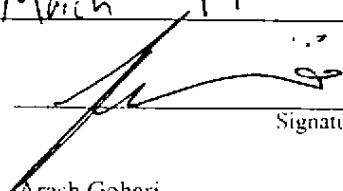
E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated March 17<sup>th</sup> 2021

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Arash Gohari

\_\_\_\_\_  
Typed or printed name of signee