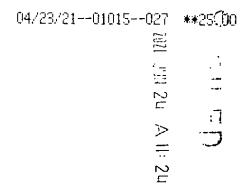
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(Requestor's Name)	
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FLORIDA DEPARTMENT OF STATE Division of Corporations

June 9, 2021

DARIA FOX 300 S. AUSTRALIAN AVE UNIT 1021 WEST PALM BEACH, FL 33401

SUBJECT: MINI ARCHITECTS, LLC

Ref. Number: L21000055394

We have received your document for MINI ARCHITECTS, 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):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Summer Chatham OPS

Letter Number: 621A00012595=

www.sunbiz.org

COVER LETTER

TO: Registration S Mivision of Co			
CUB ID CT.	Min: Archite	ots. 11C	•
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
		Fox Name of Person	
		Name of Person	
	Mini A	rehitects LLC Firm/Company	
		Firm/Company	
	300 S Au	stralian ave unit	1021
		stralian ave unit	
	b1	2	
	West Halm	Beach, FL 3340 City/State and Zip Code)
	E-mail address: (3@ gmail. com	fication)
For further information	concerning this matter, please co		
Daria	Fox	at (<u>305</u>) <u>843 4</u> Area Code Daytim	1904
Name	of Person	Area Code Daytim	e Telephone Number
Puntared in a shoot for	sk - Callanging amount		Wi
Enclosed is a cheek for		_	
X \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status 2& Certified Copy (additional copy is enclosed)
			11: 21:
Mailing Addre	34E*	Street Address:	<u> </u>
Registration		Registration Se	ection
-	Corporations	Division of Cor	rporations
P.O. Box 63		The Centre of T	
Tallahassee,	FL 32314		oe Street, Suite 810
		Tallahassee, FL	_ 32303

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

Min; Architects LLC (Name of the Limited Liability Company as it now apperatus (A Florida Limited Liability Company)	ars on our records.)
The Articles of Organization for this Limited Liability Company were filed on Florida document number \(\text{L 21000055394} \)	2/1/2021 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company l	<u>here</u> :
The new name must be distinguishable and contain the words "Limited Liability Company," the	designation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)	
	. 0
	7521
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our	
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our	records, enter the name of the new regis
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	records, enter the name of the new regis
New Registered Office Address:	records, enter the name of the new regis

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
AMBR	Daria S Fox	300 3 Australian ave, unit 102	<u>I</u> □Add
		West Palm Beach, FL 33401	□Remove
			Change
AMBR	Christian G Steixner	318 Sw 13th ave,	XAdd
		Bounton Beach, FL 33435	□Remove
			□Change
			□Add
			Remove
			☐ □Change
			⊟ ☐Remove
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	D -
ective date, if other than the date of filing:	(optional) \gtrsim
ective date, if other than the date of filing: 1 effective date is listed, the date must be specific and cannot be prior to date of filite: If the date inserted in this block does not meet the applicable statutor cument's effective date on the Department of State's records.	ing or more than 90 days after filing.) Purfuant to 605,020
secord specifies a delayed effective date, but not an effective time, at 12:0 is filed.	La.m. on the earlier of: (b) The 90th day after the
ed June 20 . 2021	X
	AV .
Signature of a member or authorized representation	entitive of a member

Filing Fee: \$25.00