4/8/2021

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000139992 3)))



H210001399923ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BLACKLEDGER ENTITY MANAGEMENT LLC

Account Number : 120150000089

Phone

: (305)444-8800

Fax Number

: (305)444-4010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

long hooaduisors.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

AVENIDA US LLC

Certificate of Status	Status 0	
Certified Copy	0	
Page Count	03	
Estimated Charge	\$25.00	

Help

Electronic Filing Menu

Corporate Filing Menu

ARTICLES OF AMENDMENT . TO ARTICLES OF ORGANIZATION OF

AVENIDA US LLC		
(Name of the Limited [Arlands Le	Company as it now appears no our reconstell Liability Company)	<u>u(r)</u>
The Articles of Organization for this Limited Liability Com Florida document number L21000098048	, , ,	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	d Jlability company here:	
AVENIDA REALTY US LLC		!
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "Li	C' or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	<u>m</u>	-
·		
	•	
Enter new mailing address, if applicable:	· · · · · · · · · · · · · · · · · · ·	<u> </u>
(Malling address MAY RE A POST OFFICE ROX)		
	·	<u>;;;;;;</u> co
B. If amending the registered agent und/or register registered agent and/or the new registered office address	red office address on our recor is here:	ds, enter the name of the new
		;;
New Registered Office Address:	Enter Florida street wild	rit
	1	Florida '
	City	Zip Code
New Registered Agent's Signature, If changing Registered A	leent:	:
I hereby accept the appointment as registered agent an provisions of all statutes relative to the proper and com accept the obligations of my position as registered agenticing filed to merely reflect a change in the registered company has been notified in writing of this change.	plete performance of my duties, nt as provided for in Chapter 60.	and I am familiar with and S. F.S. Or, if this document is
;	lf Changing Registered Agent, Signatur	re of New Hegisteresi Agent
1	age 1 of 3	

If amending Authorized Person(s) authorized to manage, enter the fittle, name, and address of each person, being added or removed from our records: MGR = Manager AMBR = Authorized Member Title <u>Name</u> <u>Address</u> Type of Action _□ Add □ Remove _ Change _□ Add _ Remove _U Change _ Change _□ ∧₫₫ _ 🗆 Remove _O Change __ Remove _C Change bb∧ □ □ Remove _ Change Page 2 of 3

Bege: 4 of 5 MA 10:11 1205180140

Fax: (850) 617-6383

:oI

From: Angelica Mohamad Fax; 13054448800

To:

				
·	<u>`</u>			
		<u></u>		
				
· · · · · · · · · · · · · · · · · · ·				
·				
<u> </u>				
		·	· · · · · · · · · · · · · · · · · · ·	
	_			
			<u> </u>	
		·		
ffective date, if other than t an effective date is listed, the date t	he date of filing:	prior to date of filing or more th	(optional) an 90 days after filing.) Pu	rswint to 603.02 Look by listed :
in effective date is listed, the date to lote: If the date inserted in this locument's effective date on the	INDEX MORS DUTINGED THE ST	DRESOIC SOMMON A HITTIE ICA		that or inseq.
e record specifies a delay The 90th day after the r	red effective date, but ecord is filed.	not an effective time	, at 12:01 a.m. on	the earlier
ated April 7th	2021	•		
4144	wh. 13_			<u> </u>
	signature of a member or	nutriced representative of o	member	

Page 3 of 3