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## **COVER LETTER**

TO:

Registration Section

Tallahassee, FL 32314

Certified Copy  (additional copy is enclosed) Certified Copy	Divi	ision of Corp	orations		
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:    Laura Villanueva			VA REAL ESTATE, LLC		
Please return all correspondence concerning this matter to the following:    Laura Villanueva	SUBJECT:		Name of Limite	d Liability Company	
Caura Villanueva   Name of Person					
Name of Person  Wilmer Villanueva LLC F/K/A Villanueva Real Estate LLC  Firm/Company  11264 SW 236 Street  Address  Homestead, FL 33032  City/State and Zip Code  [aura@villanuevatearn.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Cristina DeCicco  Name of Person  Telephone Number  Enclosed is a check for the following amount:  Securificate of Status  Certificate of Status  Certified Copy  (abilitional conv is enclosed)  Certified Copy  Certified Copy	raease retum	ran correspon	idence concerning this matter of	, and the second	
Wilmer Villanueva L.L.C F/K/A Villanueva Real Estate L.L.C    Firm/Company			Laura Villanueva		
Firm/Company  H264 SW 236 Street  Address  Homestead, FL 33032  City/State and Zip Code    laura@villanuevateam.com     E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:    Cristina DeCicco				Name of Person	
Address   Homestead, FL 33032   City/State and Zip Code			Wilmer Villanueva LLC F/I	K/A Villanueva Real Estate LLC	
Address    Homestead, F1.33032				Firm/Company	
City/State and Zip Code			11264 SW 236 Street		<u></u>
City/State and Zip Code   laura@villanuevateam.com				Address	
E-mail address: (to be used for future annual report notification)   For further information concerning this matter, please call;   Cristina DeCicco			Homestead, FL 33032		
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Cristina DeCicco  305 781-5742  at (				City/State and Zip Code	
Enclosed is a check for the following amount:  ■ \$25.00 Filing Fee  Certificate of Status  Cristina DeCicco  305  Area Code  Daytime Telephone Number  Daytime Telephone Number  \$60.00 Filing Fee, Certificate of Status  Certified Copy  (additional copy is enclosed)  Certified Copy  Certified Copy  Certified Copy  Certified Copy  Certified Copy					ei(Contian)
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Name of Person  Area Code  Daytime Telephone Number  Enclosed is a check for the following amount:  ■ \$25.00 Filing Fee  Certificate of Status  Certified Copy  (additional copy is enclosed)  Certified Copy  Certified Copy	For further i	information c	oncerning this matter, please ca	ill:	
Name of Person  Area Code  Daytime Telephone Number  Enclosed is a check for the following amount:  ■ \$25.00 Filing Fee  Certificate of Status  Certified Copy  (additional copy is enclosed)  Certified Copy	Cristina De	eCicco		at (	
■ \$25.00 Filing Fee  S30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status  Certified Copy Certified Copy Certified Copy		Name o	f Person	Area Code Dayti	me Telephone Number
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Mailing Address:  Registration Section  Registration Section  Division of Corporations	R	egistration	Section	Registration S	
Division of Corporations P.O. Box 6327  Division of Corporations The Centre of Tallahassee					

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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

VILLANUEVA REAL ESTATE LLC	
(Name of the Limited Liability Company as it now (A Florida Limited Liability Com	appears on our records.) pany)
The Articles of Organization for this Limited Liability Company were filed florida document number 1.21000105697	on 03/04/2021 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability compa	any here:
WILMER VILLANUEVA, LLC	
he 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:	
Principal office address MUST BE A STREET ADDRESS)	~?
The that office dates strong be with the transfer	
<del>-</del>	
Enter new mailing address, if applicable:	7. 7)
Mailing address MAY BE A POST OFFICE BOX)	
	ディー (元) 
	5- 10
3. If amending the registered agent and/or registered office address on agent and/or the new registered office address here:	our records, <u>enter the name of the new regist</u>
Name of New Registered Agent:	
New Registered Office Address:	
	nter Florida street address
	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.

Cuv

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
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an effective date is liste ote: If the date inse	ner than the date of filited, the date must be specific a ried in this block does not date on the Department of	and cannot be prior to date of fi it meet the applicable statut	(opt iling or more than 90 days afte ory filing requirements, th	er filing.) Pursuant to 60:	5,0207 ( ted as (
record specifies a de l is filed.	layed effective date, but n	not an effective time, at 12:	01 a.m. on the earlier of: (	b) The 90th day afte	er the
ated	Signature of	a member or authorized repre	esentative of a member		
	Lacera	Uillanu Typed or printed name of	ieva		