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(Re	questor's Name)	-
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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2022 HAY 25 AM 7: 16
SECRETARY OF STATE

A. BUTLER MAY 3 1 2022

COVER LETTER

	ision of Corp		,	
SHRIFCT.		EL CARRIE REAL ESTATE.	rrc	•
SUBJECT:Name of Limited Liability Company				
The enclosed	d Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspor	ndence concerning this matter	to the following:	
		EMMANUEL CARRIE		
Name of Person				
EMMANUEL CARRIE REAL ESTATE, LLC				
			Firm/Company	
		401 E LAS OLAS BLVD	STE 130-108	
			Address	
		FORT LAUDERDALE, F	L 33301	
			City/State and Zip Code	
		emmanuel.carrie@gmail.co	m to be used for future annual report no	stification)
For further in	nformation co	oncerning this matter, please co	·	Mileanony
EMMANUI	EL CARRIE		561 305-0317	
	Name of	Person	Area Code Dayti	me Telephone Number
Enclosed is a	a check for the	e 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 Address gistration S		Street Address: Registration S	ection
Div	vision of Co	orporations	Division of Co	orporations
	D. Box 6327		The Centre of	
rai	llahassee, F	L 32314	2415 N. Monr Tallahassee, F	toe Street, Suite 810 L 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF · ·

FILED

2022 HAY 25 AM 7: 17

EMMANUEL CARRIE REAL ESTATE, LLC

ARRIE REAL ESTATE, LLC

(Name of the Limited Liability Company as it now appears on our retords: IARY OF STATE
(A Florida Limited Liability Company)

IALLAHASSEE, FL

The Articles of Organization for this Limited Liability Co Florida document number L21000128248	ompany were filed on March 18, 2021	and assigned
This amendment is submitted to amend the following:	_	
A. If amending name, enter the new name of the limit	ted liability company here:	
EMMANUEL CARRIE, LLC		
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	(ESS)	_
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	l office address on our records, <u>enter tl</u>	he name of the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flor	rida
	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:

or removed from our records:	•	 	-	
MGR = Manager AMBR = Authorized Member				

<u>Title</u>	<u>Name</u>	Address	Type of Action
	· · · · · · · · · · · · · · · · · · ·		□Add
			□ Remove
			□Add
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Faatius .	data if ather than the data of filings	(ontional)
<u>ote:</u> if th	e date, if other than the date of filing: ive date is listed, the date must be specific and cannot be prior to date of filing the date inserted in this block does not meet the applicable statutory t's effective date on the Department of State's records.	g or more than 90 days after filing.) Pursuant to 605.0207 filing requirements, this date will not be listed as
ecord sp is filed.	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
ited	MAY 20 . 2020.	
	Signature of a member or authorized representation	ntutive of a member
	Signature of a memoer of audiorized represen	MAITO OLD HIGHIOGI
	EMMANUEL CARRIE	

Filing Fee: \$25.00



RECEIVED

2022 HAY 25 AM 11: 19

FLORIDA DEPARTMENT OF STATE

Division of Corporations

TALLAHASSEE FL

Letter Number: 422A00010602

May 9, 2022

EMMANUEL CARRIE 401 E LAS OLAS BLVD STE 130-108 FORT LAUDERDALE, FL 33301

SUBJECT: EMMANUEL CARRIE REAL ESTATE, LLC.

Ref. Number: L21000128248

We have received your document for EMMANUEL CARRIE REAL ESTATE, 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.

Anissa Butler Regulatory Specialist II

www.sunbiz.org