# L21000146506

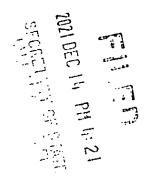
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates of S	tatus
Special Instructions to	Filing Officer:	
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Office Use Only



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MC Ex Avend



November 16, 2021

CARLOS SOSA 267 MINORCA AVE SUITE 100 CORAL GABLES, FL 33134

SUBJECT: 4216 FAIRWAY LANE, LLC

Ref. Number: L21000146506

We have received your document for 4216 FAIRWAY LANE, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA CORP, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

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) 245-6053.

Letter Number: 921A00027865

Yvette Scott Supervisor

www.sunbiz.org

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### **COVER LETTER**

FO: Registration Se Division of Cor	
SUBJECT:	4216 FAIRWAY LAWE LLC Name of Limited Liability Company
The enclosed Articles of	Amendment and fee(s) are submitted for filing.
Please return all correspo	ondence concerning this matter to the following:
	Cyclos E, Sosa
	Name of Person
	Firm/Company
	267 MINORCA AVE. STE. 100
	Cors GABLES Fl. 33134  City/State and Zip Code  CSOSA GG @ GHAIL. COM  F-mail address: (to be used for future annual perport position)
	E-mail address: (to be used for future annual report notification)
for further information e	concerning this matter, please call:
CAROS	of Person at (305) 9650084  Area Code Daytime Telephone Number
name o	Area Code Daytime Telephone Number
inclosed is a check for th	he following amount: \$35 already sext.
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status  Certified Copy tadditional 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

4216 Fair	EWAY LANE (LCC 14 PH 1:21
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records ) UNE 1/11. J. STATE Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number L 21000146506	were filed on April 7, 2021 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
DETPHI XT INVESTI	MENTS LLC
The new name must be distinguishable and contain the words "Limited Liabi	
Enter new principal offices address, if applicable:	Cord GARLES, FL. 33134
(Principal office address MUST BE A STREET ADDRESS)	Cord GARLES, Fl. 33134
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	
	Enter 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.

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>	Name	Address	Type of Action
AMBR	CARLOSESOSA	625 houndiers Ave.	□Add
		Cors   G43/23, F1 33143	🗀 Remove
			(EChange
Man	Cristina Papini	625 Goudlienz Aue.	□ Add
		Const GAR 123, F1.33143	ERemove
			□Change
AMBR	3CE INVESTMENT LLC	685GONDOLIENE AVE.	□Add
		Coral 648=3,71.3314	Remove
			□Change
AMBR	BERNARD GAMBOA	781 CRANDON BluD.	(DA)dd
		APT. 502 TOWER 3	□Remove
		Mismi , 71. 33 149	□Change
AMBE	RUBEU PULLAR	3807 TIERRA AMARILA	W.
		Richmond, Tx 7740	 □Remove
			□Change
AMBR	ENIO PERE	4117 W. Palm Lipe Deiv	E Mad
		# B3	□Remove
		POMPOND BEACH, #1.33	.069 □Change
			~

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