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(Re	questor's Name)	
(1)	questor s ryanie,	
(Ad	ldress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
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ocuSign Envelope ID: C	3824ECD-2F2C-41BD-BEDE-E38E7006	SEE61 COVER LETTER	
	on Section of Corporations		
SUBJECT:	2030 CORONDO LLC		
	Name of Lin	ited Liability Company	
The enclosed Artic	es of Amendment and fee(s) are sub	omitted for filing,	
Please return all co	rrespondence concerning this matter	to the following:	
	Carina Veksler		
		Name of Person	
		Firm/Company	
	18851 NE 29th Ave #108		_ <u></u>
	Aventura, FL 33160	Address	
		City/State and Zip Code	
	ivonngoihman@gmail.com E-mail address: (to be used for future annual report notific	ration)
For further informa	tion concerning this matter, please c		,
Ivonn Goihman		305 812-5093	
N	ame of Person		Telephone Number
Enclosed is a check	for the following amount:		
□ \$25.00 Filing F	cee \$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 enclose



Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327

Street Address: Registration Section **Division of Corporations** The Centre of Tallahassee

2030 Coronado LLC

DocuSign Envelope ID: C3824ECD-2F2C-41BD-BEDE-E38E70068E61 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

(Name of the Limited Liability Compa (A Florida Limited	nny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000154963</u> .	were filed on April 2, 2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	18851 NE 29 Avenue, Stc 108	
	Aventura, FL 33180	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, enter the na	me of the new regist
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.

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It amending Authorized rerson(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
MGR	Richard Goihman	6000 Island Blvd #2901	■Add
		Aventura, FL 33160	□ Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□ Change
			□Add
			□Remove
			Change
			□ Add
			□Remove

Remove

					
					
					
	 				
					
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an effectiv	e date is listed, the date mus	be specific and cannot	be prior to date of filing	option (option g or more than 90 days after fi	
ote: If the ocument's	e date inserted in this blo s effective date on the Do	ock does not meet the partment of State's i	e applicable statutory records.	filing requirements, this c	ate will not be listed as
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record spe	ecifies a delayed effective	e date, but not an effe	ective time, at 12:01	a.m. on the earlier of: (b)	The 90th day after the
is filed.	·			2 2 2 (5)	The John day after the
	40 (40 (2024				
ated	10/10/2021		·		
	DocuSigned by:	1.1			
	Carina Ve	ESUV Signature of a member	or authorized represen	tative of a member	
•		ARC	adminiment represent	and the minimum	