## L21000260616

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## **COVER LETTER**

	Registration S Division of Co			
cusuc		LAND HOLDINGS #12 LLC		
SUBJEC	-l: <u></u> _	Name of Lim	ited Liability Company	
The enck	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all corresp	ondence concerning this matter	to the following:	
		RAUL MEDINA JR		
			Name of Person	
		MEDINA LAND HOLDIN	NGS #12 LLC	
			Firm/Company	
	P.O. BOX 430871			
			Address	
		SOUTH MIAMI, FL 332	243	
			City/State and Zip Code	
		RAUL@MEDINALANDH		
			to be used for future annual report no	tification)
For furth	er information (	concerning this matter, please ca	all:	
RAUL M	MEDINA JR		305 525-4601	
	Name o	of Person	Area Code Daytii	ne Telephone Number
Enclosed	is a check for t	the following amount:		
[] \$25.	00 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)

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

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## MEDINA LAND HOLDINGS #12, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

· · · · · · · · · · · · · · · · · · ·	(A Florida Limited	Liability Company)			
The Articles of Organization for this Limited I	Liability Company	were filed on <u>06/04/2021</u>	and assigned		
Florida document number 1.21000260616	·				
This amendment is submitted to amend the fol	lowing:				
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 abbrevi	ation "L.L.C."		
Enter new principal offices address, if appli	cable:	7400 SW 50TH TERR			
(Principal office address MUST BE A STRE	ET ADDRESS)	SUITE 205			
***		MIAMI, FL 33155			
Enter new mailing address, if applicable:		P.O. BOX 430871			
(Mailing address MAY BE A POST OFFICE	EBOX)	SOUTH MIAMI, FL. 33243			
B. If amending the registered agent and/or agent and/or the new registered office address	registered office : ess here: RAUL MEDIN		the new registered		
Name of New Registered Agent:					
New Registered Office Address:	7400 SW 50TH TERR, SUITE 205				
		Enter Florida street address	10		
	MIAMI	, Florida 33155	3, 0		
New Registered Agent's Signature, if changing		p Code 💬			
			2/11 0		
I hereby accept the appointment as register, provisions of all statutes relative to the propaccept the obligations of my position as reg being filed to merely reflect a change in the company has been notified in writing of this	per and complete istered agent as p registered office	performance of my duties, and I am famil provided for in Chapter 605, F.S. Or, if the	iar with and is document is		

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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	RAUL MEDINA, JR	7400 SW 50TH TERR	
		SUITE 205	□Remove
		MIAMI, FL 33155	□ Change
AMBR	ILEANA MEDINA	7400 SW 50TH TERR	·
		SUITE 205	
		MIAMI, FL 33155	
			□Remove
			☐ Change
			🗆 Add
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ective date, if other than the d	late of filing:		(optiona	al)
reffective date is listed, the date must be tel. If the date inserted in this block	be specific and cannot be	prior to date of filing or	more than 90 days after fili	ng.) Pursuant to 605,020
cument's effective date on the Dep			ing requirements, this da	ne will not be fisted a.
cord specifies a delayed effective	date, but not an effect	ive time, at 12:01 a.m	on the earlier of: (b)	The 90th day after the
s filed.				
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				757
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S	ignature of a member of	authorized representation	ve of a member	<del></del>

Filing Fee: \$25.00