## L21000065296

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## **COVER LETTER**

TO:

Registration Section

Division of Cor	rporations			
	BAVE, LLC			
SUBJECT:	Name of Lin	nited Liability Company	<del></del> ,	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Jorge Lopez			
		Name of Person		
		Firm/Company		
	15874 SW 50th Street			
Address				
	Miramar, Florida 33027			
		City/State and Zip Code		
	Jorgelopezmiami@hotmail. E-mail address: (	.com to be used for future annual report not	itication)	
For further information c	oncerning this matter, please c	-		
Jorge Lopez		786 399-9278 at ()		
Name o	f Person	Area Code Daytin	ne Telephone Number	
Enclosed is a check for the	ne following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional cupy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addres Registration S Division of C	Section	Street Address: Registration Se Division of Co		
P.O. Box 632 Tallahassee, I		The Centre of 1		
1 41141140000, 1		4713 N. IVIOUIQ	re succe, suite orv	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

121 NW 28AVE, LLC					
(Name of the Lithi	ted Liability Compa (A Florida Limited I	ny as it now appears on our i liability Company)	records.)		
The Articles of Organization for this Limited L	liability Company	were filed on 6/8/2021		_ and assign	ned
Florida document number L21000265296					
This amendment is submitted to amend the fol-	lowing:				
A. If amending name, enter the new name of	of the limited liab	ility company here:			
The new name must be distinguishable and contain the	words "Limited Liabil	lity Company," the designation	"LLC" or the abbre	viation "L.L.C	
Enter new principal offices address, if applicable:		15874 SW 50 Street			
(Principal office address MUST BE A STREET ADDRESS)		Miramar, Florida 33027			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		15874 SW 50 Street	SECT	2021 0	
		Miramar, Florida 33027	75-T	OCT .	$\frac{\Pi}{\Pi}$
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B. If amending the registered agent and/or agent and/or the new registered office address.		address on our records,	enter the name o	••	egister
the new regularies of the same				20	_
Name of New Registered Agent:	Jorge Lopez				<i>-</i> 20
New Registered Office Address:	15874 SW 50 S	Street			
		Enter Florida street	address		
	Miramar		, Florida	<u>,                                      </u>	
		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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR .	Luis G. Alvarez	1446 NW 153rd Lane	□Add
		Pembroke Pines, Florida 33028	■Remove
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			□Add
			□ Remove
			□Change
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			□Remove
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			□Change

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	Oct	tober 1, 2021	-		
ffective date, if other than to fan effective date is listed, the date in Note: If the date inserted in this	nust be specific and canno block does not meet th	ne applicable statut	iling or more than 90 tory tiling requirem	(optional) days after filing.) Pursu tents, this date will n	ant to 605.0207 of be listed as
ocument's effective date on the	Department of State's	records.			
record specifies a delayed effec d is filed.	tive date, but not an eff	fective time, at 12:	01 a.m. on the earl	ier of: (b) The 90th	day after the
a no med.					
October 1	202	:1	11.11		
	. 202	<u></u>	Af:		
October 1	Signature of a membe		Sentative of a member	 :r	

Filing Fee: \$25.00