

L21 000 301 099

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

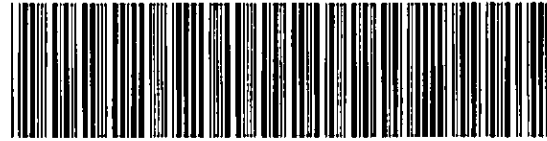
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09 '20 '21--01024--014 **25.00

21 OCT 19 PM 3:01

T. MATTHEWS

OCT 28 2021



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 30, 2021

ELIAS CORREA MENENDEZ
9700 S. DIXIE HIGHWAY PH1100
MIAMI, FL 33156

SUBJECT: LASHAI LUXURY RENTALS FL, LLC
Ref. Number: L21000301099

We have received your document for LASHAI LUXURY RENTALS FL, 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):

The registered agent must sign accepting the designation.

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.

Tekayla T Matthews
OPS

Letter Number: 121A00023694

COVER LETTER

TO: Registration Section
Division of Corporations

RECEIVED

2021 OCT 19 AM 8:03

SUBJECT: LASHAI LUXURY RENTALS FL, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Elias Correa Menendez

Name of Person

Trembly Law Firm, P.L.L.

Firm/Company

9700 S. Dixie Highway, PH 1100

Address

Miami, FL 33156

City/State and Zip Code

Elias@tremblylaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Elias Correa Menendez

305 431-5678

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for 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
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**

21 OCT 19 PM 3: 01

LASHAI LUXURY RENTALS FL, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 06/30/2021 and assigned
Florida document number 1.21000301099.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited 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 ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Trembly Law Firm, P.L.L.

New Registered Office Address:

9700 S. Dixie Highway, Penthouse 1100

Enter Florida street address

Miami

, Florida 33156

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

21 OCT 19 PM 3: 01

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	TEONIA ROBINSON	8111 SANDPIPER CIRCLE, UNIT 417	<input type="checkbox"/> Add
		NOTTINGHAM, MD 21236	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	CARTERION, LLC	8111 SANDPIPER CIRCLE, UNIT 417	<input checked="" type="checkbox"/> Add
		NOTTINGHAM, MD 21236	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

21 OCT 19 PM 3:01

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated September 14, 2021



Signature of a member or authorized representative of a member

Teonia Robinson

Typed or printed name of signee

Filing Fee: \$25.00