La1000308455

(Requestor's Name)				
(Address)				
(Nadicss)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

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98/26/21--01019--018 ++25.00



9/8/202

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT:	LA AMALIA GROUP LLC					
SUBJECT:	•	Name of Lim	ited Liability Company			
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspo	ondence concerning this matter	to the following:			
		Valeria Seminara				
Name of Person						
		Tis Manager LLC				
		Firm/Company				
4000 Hollywood Blvd, Suite 140 N Address						
Address						
Hollywood, Fl. 33021						
			City/State and Zip Code			
		Admin@FinkaRealty.com				
		E-mail address: (to be used for future annual report notif	lication)		
For further in	oformation c	oncerning this matter, please ca	all:			
Valeria Semi	inara		954 2943465 at ()			
	Name o	f Person	Area Code Daytime	Telephone Number		
Enclosed is a	check for the	ne following amount:				
■ \$25.00 F	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Reg Div P.C	gistration Striction of Co. Box 632 lahassee, I	Section Corporations 17	Street Address: Registration Sec Division of Con The Centre of T 2415 N. Monroo Tallahassee, FL	porations allahassee e Street, Suite 810		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

s on our records.)
do6/2021 and assigned
<u>re</u> :
esignation "LLC" or the abbreviation "L.L.C."
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<u> </u>
ecords, enter the name of the new registe
ida street address
, Florida 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 a 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

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	TIS Manager LLC	4000 Hollywood Blvd, Suite 140 N	□Add
		Hollywood, Fl. 33021	Remove
			□Change
MGR	Fernando Tarditi	4000 Hollywood Blvd. Suite 140 N	= Add
		Hollywood, Fl. 33021	□ Remove
			□ Change
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ffective	e date if other than the date of filing:	
Note: If	e date, if other than the date of filing:	Pursuant to 605.020 vill not be listed a
record s d is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The l.	90th day after the
	ugust 18th , 2021	
Dated A		
Dated A	Signature of a member or authorized representative of a member	