

K21 0000336937

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Signature 6204

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03 18 2022 11:11 AM

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2022 MAR 28 PM 4:21
CLERK OF COURT

Amend/Name Change

MAY - 3 2022

D CUSHING

COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: Eternity Torres 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:

Kristina Torres

Name of Person

Firm/Company

10861 nw 21st street

Address

Coral Springs , FL 33071

City/State and Zip Code

Kristinahhm@gmail.com

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

For further information concerning this matter, please call:

Kristina Torres

954

305-6797

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

FILED

2022 MAR 28 PM 4:21

SECRETARY OF STATE
TALLAHASSEE, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
2022 MAR 28 PM 4:
SECRETARY OF STATE
TALLAHASSEE, FL

March 1, 2022

KRISTINA TORRES
10861 NW 21ST STREET
CORAL SPRINGS, FL 33071

SUBJECT: ETERNITY TORRES LLC
Ref. Number: L21000336937

We have received your document for ETERNITY TORRES LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

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.

Diane Cushing
Senior Section Administrator

Letter Number: 622A00005024

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Eternity Torres 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 July 26, 2021 and assigned
Florida document number L21000336937

This amendment is submitted to amend the following:

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

Eternity Towers LLC

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:

10861 nw 21st street

(Principal office address MUST BE A STREET ADDRESS)

Coral Springs

FL, 33071

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:

New Registered Office Address:

Enter Florida street address

Coral Springs

Florida 33071

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

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

Title	Name	Address	Type of Action
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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[illegible]

(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)

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 3/14/22, _____

Signature of a member or authorized representative of a member

Typed or printed name of signee