

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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H210003900603ABCV

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : MARVEN ENTERPRISES, INC
Account Number : I20210000171
Phone : (786)440-5396
Fax Number : (800)249-3601

****Enter the email address for this business entity to be used for future
annual report mailings. Enter only one email address please.****

Email Address: Dibanksrealtor@gmail.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
BUNGALOO, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

2021 OCT 20 AM 8:34

STATE OF FLORIDA
DIVISION OF CORPORATIONS

STATE OF FLORIDA
DIVISION OF CORPORATIONS

2021 OCT 20 PM 12:41

FILED

COVER LETTER

H210003900603

TO: Registration Section
Division of Corporations

SUBJECT: BUNGALOO, 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:

DIANA BANKS-BASERVA

Name of Person

Firm/Company

19109 SW 80TH CT

Address

CUTLER BAY, FLORIDA 33157

City/State and Zip Code

Dibanksrealtor@gmail.com

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

For further information concerning this matter, please call:

DIANA BANKS-BASERVA

786 663-9460
at ()
Area Code Daytime Telephone Number

Name of Person

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

H210003900603

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

H210003900603

BUNGA1.OO, I.L.C.

(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 FLORIDA and assigned
Florida document number L21000340281.

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:

New Registered Office Address:

19109 SW 80TH CT

Enter Florida street address

CUTLER BAY

City

, Florida

33157

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

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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>	<u>Address</u>	<u>Type of Action</u>
AMBR	DIEGO BENAVIDES ORTIZ	17945 SW 97TH AVE APT 509	<input type="checkbox"/> Add
		PALMETTO BAY, FL 33157	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	JOSE M CALZADA ROMO	17945 SW 97TH AVE APT 509	<input type="checkbox"/> Add
		PALMETTO BAY, FL 33157	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(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.

Typed or printed name of signee

FILED
2009 OCT 20 PM 12:41
CLERK OF DISTRICT COURT
JANESVILLE, WISCONSIN
The 90th day after the

Filing Fee: \$25.00