

L21000341880

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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2023 AUG -7 PM 1:12  
STORE MAY 20 11  
MILWAUKEE WI

*Amend.*

DEC 2 2023

D CUSHING

fax

**DATE:** December 7, 2023

**TO:** DIV. OF CORPORATIONS **Ph:** 850-245-6050 **Fax:** 850-245-6014

**FROM:** CARMEN RIVERA **Ph:** 954-260-5933 **Fax:** 954-346-4036

**Number of pages (including cover sheet):** 7

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A request to amend the Articles of Organization for LA RIVERA LLC was submitted on Aug. 2, 2023 (USPS tracking attached) and we have not heard back nor seen any update on the Sunbiz.org website, other than an it showing a Last Event LC Amendment on 08/07/2023.

We would appreciate an update on the status or if additional information is required.

Copy of Cover Letter and Articles of Amendment submitted are attached.

Thank you,

Carmen Rivera

Dec. 14. 2023 1:19PM

No. 4157 P. 2

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: LA RIPIERA 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:

CARMEN RIVERA

Name of Person

CAG FINANCIAL CONSULTANTS LLC

Firm/Company

4233 W HILLSBORO BLVD., UNIT 970751

Address

COCONUT CREEK, FL 33097

City/State and Zip Code

CSRIVERA06@GMAIL.COM

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

For further information concerning this matter, please call:

CARMEN RIVERA

954 260-5933

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

STATE OF FLORIDA  
TALLAHASSEE

2023 AUG - 7 PM 1:12

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\$50.00  
2415  
6000  
6000  
6000

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

LA RIPIERA 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 07/28/2021

Florida document number L21000341880

This amendment is submitted to amend the following:

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

N/A

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:

N/A

**(Principal office address MUST BE A STREET ADDRESS)**

Enter new mailing address, if applicable:

N/A

**(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:

N/A

New Registered Office Address:

Enter Florida street address

Florida

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**

FILED  
2023 AUG -7 PM 1:12  
SECRETARY OF STATE  
FLORIDA

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	MARIA GUADALUPE CORDON	2190 NE 68TH STREET, UNIT 524	<input checked="" type="checkbox"/> Add
		FT LAUDERDALE, FL 33308	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	JUAN CARLOS I. CORDON	2190 NE 68TH STREET, UNIT 524	<input checked="" type="checkbox"/> Add
		FT LAUDERDALE, FL 33308	<input type="checkbox"/> Remove
			<input 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

N/A

**Filing Fee: \$25.00**