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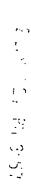
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COVER LETTER

TO: Registration Se Division of Cor			•
378 Mahog	any, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fec(s) are sub	mitted for filing	
	ndence concerning this matter	-	
		-	
	Michael P. Peterson, Esq.		
		Name of Person	
	Peterson Baldor & Marang	ges PLLC	
		Firm/Company	
	8000 SW 117 Avenue, Sui	tc 206	
		Address	
	Miami, Florida 33183		
	 	City/State and Zip Code	
	michael@pbmlegal.net		
		to be used for future annual report notific	cation)
For further information co	oncerning this matter, please co	all:	
Michael P. Peterson, Esq	ŀ	305 270-3773 at (
Name of	l Person		Telephone Number
Enclosed is a check for th	ne 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)
Ngoilian Addan	a.	Semant tuldunami	
Mailing Address Registration S		<u>Street Address:</u> Registration Sect	ion
_		_	

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

378 Mahogany, LLC		
(Name of the Limited Liability (A Florida	y Company as it now appears on our record- Limited Liability Company)	<u>«.</u>)
The Articles of Organization for this Limited Liability Co	ompany were filed on	and assigned
Florida document number L21000408764	 •	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limi	ted 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 ADDR	ESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, enter	the name of the new registere
agent and/or the new registered office address here.		
Name of New Registered Agent:		
New Devices of Office Address		
New Registered Office Address:	Enter Florida street address	5
	. Flo	orida
	City	Zip Côde
New Registered Agent's Signature, if changing Registered	Agent:	- CG
I hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and co accept the obligations of my position as registered ag being filed to merely reflect a change in the registered	omplete performance of my duties, an gent as provided for in Chapter 605, I	nd I am familiar with and F.S. Or, if this document is
company has been notified in writing of this change.		
		7 7

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Cuesta, Michael	1414 NW 107 Avenue	
		Suite 401	□Remove
		Miami, Florida 33172	□Change
MGRM	Cuesta, William	1414 NW 107 Avenue	■Add
		Suite 401	
		Miami, Florida 33172	
			□Add
		 	□Remove
		□Change	
			□Add
			□Change
			□Add
			□Remove
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Effactiva da	te, if other than	the date of fili	na.			_ (optional)	
f an effective of Note: If the	late is listed, the date date inserted in thi ffective date on th	must be specific as is block does not	nd cannot be pri meet the appl	or to date of filing icable statutory	or more than 90 d	ays after filing.) Pur	suant to 605,0207 not be listed as
record spec d is filed.	fics a delayed effe	ective date, but no	ot an effective	time, at 12:01 a	m. on the earlie	er of: (b) The 90	th day after the
Dated <u>S</u>	EPTEMBL	12 21	.202				
_		Signature of	a member or aut	orized representa	itive of a member		

Filing Fee: \$25.00