

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

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

From:

Account Name : SUNBIZ ONLINE LLC
Account Number : I20210000128
Phone : (305)244-9500
Fax Number : (954)827-9354

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

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN F.A.P. REAL ESTATE LLC

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T. LEMIEUX

APR 22 2024

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: F.A.P. REAL ESTATE 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:

RODRIGO URBINA

Name of Person

SUNBIZ ONLINE LLC

Firm/Company

2165 VAN BUREN ST SUITE 911

Address

HOLLYWOOD, FL 33020

City/State and Zip Code

RODRIGO@SUNBIZONLINE.ORG

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

For further information concerning this matter, please call:

RODRIGO URBINA

305

244-9500

Name of Person

at ()

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

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

F.A.P. REAL ESTATE 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 09/17/2021 and assigned
Florida document number L21000411179.

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:

(Principal office address MUST BE A STREET ADDRESS)

2165 VAN BUREN ST.

SUITE 911

HOLLYWOOD, FL 33020

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1801 POLK ST

UNIT 223041

HOLLYWOOD, FL 33022

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:

SUNBIZ ONLINE LLC

New Registered Office Address:

1401 SAWGRASS CORPORATE PKWY

Enter Florida street address

SUNRISE

, Florida

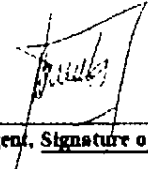
33323

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

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	NATHAN CARRILLO	2165 VAN BUREN ST	<input type="checkbox"/> Add
		SUITE 911	<input type="checkbox"/> Remove
		HOLLYWOOD, FL 33020	<input checked="" type="checkbox"/> Change
AMBR	RAQUEL COHEN	2165 VAN BUREN ST	<input checked="" type="checkbox"/> Add
		SUITE 911	<input type="checkbox"/> Remove
		HOLLYWOOD, FL 33020	<input type="checkbox"/> Change
AMBR	URIEL CARRILLO	2165 VAN BUREN ST	<input checked="" type="checkbox"/> Add
		SUITE 911	<input type="checkbox"/> Remove
		HOLLYWOOD, FL 33020	<input type="checkbox"/> Change
AMBR	PATRICK JOHN TAYLOR	2165 VAN BUREN ST	<input checked="" type="checkbox"/> Add
		SUITE 911	<input type="checkbox"/> Remove
		HOLLYWOOD, FL 33020	<input type="checkbox"/> Change
AMBR	JOSE MIZRAHI	2165 VAN BUREN ST	<input checked="" type="checkbox"/> Add
		SUITE 911	<input type="checkbox"/> Remove
		HOLLYWOOD, FL 33020	<input type="checkbox"/> Change
AMBR	JOSEPH MOUADER	2165 VAN BUREN ST	<input checked="" type="checkbox"/> Add
		SUITE 911	<input type="checkbox"/> Remove
		HOLLYWOOD, FL 33020	<input type="checkbox"/> Change

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

N/A

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 APRIL 18, 2024

Signature of a member or authorized representative of a member

NATHAN CARRILLO

Typed or printed name of signee

Filing Fee: \$25.00