

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000416090 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SUNBIZ ONLINE LLC Account Number : I20210000128 : (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

OL & VI LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: Registration Se Division of Cor	porations		¥
L21000473			
SUBJECT:	Name of Lim	ited Liability Company	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Catalina Ramirez		
		Name of Person	
	Sunbiz Online LLC		
		Firm/Company	
	1600 NW 128th Drive Sui	te 303	
		Address	
	Sunrise, FL 33323		
		City/State and Zip Code	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	catalina@sunbizonline.org		
	E-mail address: (to be used for future annual report no	tification)
For further information c	oncerning this matter, please c	all:	
Catalina Ramirez		305 244-9500 at (
Name o	f Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for the	he 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)
Malling Addres		Street Address:	
Registration Section Division of Corporations		Registration Se Division of Co	
P.O. Box 632		The Centre of	
Tallahassee,			oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ny as it now appears on our recordinability Company)	<u>s.</u>)
were filed on	and assigned
lity company here:	
ity Company," the designation "LLC	"or the abbreviation "L.L.C."
	70 2
	<u> </u>
	<u> </u>
	P D
	35 %
	35
iddress on our records, <u>enter</u>	the name of the new registe
Enter Florida sweet addres	S
, Flo	orida Zip Code
	lity company here: Ity Company," the designation "LLC ddress on our records, enter Enter Florida sweet addres. , Flo

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 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>	Name	Address	Type of Action
AMBR	Juan M. Fatone	1001 Brickell Bay Dr Suite 2700 T-5	[DAdd
		Miami, FL 33131	□Remove
			☐ Change
			□Add
			□Remove
			□ Change
			□Aહd
			□Remove
		***************************************	Change
		#FF001	□Add
		*****	□Remove
			Change
			□Remove
			Change
			□Remove
			□Change

1.1.0 ساسم ،	\mathcal{T}	$(- \triangle)$		
In The F	u gracer 6	tabilione	dational sneets, ty necess	
		w wy (/ .	
			, 	
	•	· · · · · · · · · · · · · · · · · · ·		***************************************

	 	······································		
······································		······································		
Effective date, if other the fan effective date is listed, the d Note: If the date inserted in document's effective date or	this block does not mee	t the applicable statutor	g or more than 90 days after filling requirements, this d	al) ing.) Pursuant to 605.0207 ate will not be listed as
e record specifies a delayed e rd is filed.	effective date, but not an	effective time, at 12:01	a.m. on the earlier of: (b)	The 90th day after the
November 11		2021		
/	, .	•		
	1-11.			

Filing Fee: \$25.00