

L21 000509175

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

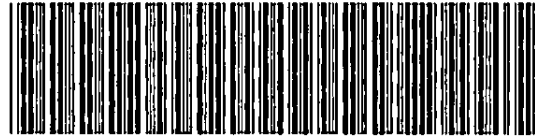
(Business Entity Name)

(Document Number)

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FILED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
22 APR 21 PM 4:05

T. MATTHEWS

JUN - 3 2022

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Alachua Verde, 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:

Silvia Moukhtara Nemer

\_\_\_\_\_  
Name of Person

Alachua Verde, LLC

\_\_\_\_\_  
Firm/Company

7717 NW 20th Lane

\_\_\_\_\_  
Address

Gainesville, FL 32605

\_\_\_\_\_  
City/State and Zip Code

Silvia@NemerRealEstate.com

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

For further information concerning this matter, please call:

Silvia Moukhtara Nemer                      352              870-8772  
\_\_\_\_\_  
Name of Person                      at (              )              Daytime Telephone Number  
Area Code

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

22 APR 21 PM 4:05

Alachua Verde, 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 12.01.2021 and assigned  
Florida document number L21000509175.

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)**

7717 NW 20th Lane

Gainesville, FL 32605

Enter new mailing address, if applicable:

**(Mailing address MAY BE A POST OFFICE BOX)**

7717 NW 20th Lane

Gainesville, FL 32605

**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:

Silvia Moukhtara Nemer

New Registered Office Address:

7717 NW 20th Lane

*Enter Florida street address*

Gainesville

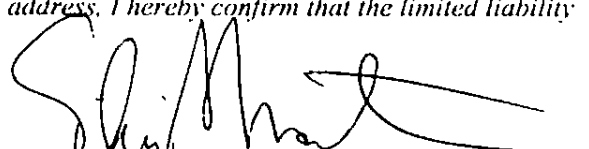
*City*

Florida 32605

*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>
MGR	Jose Moreno	240 NW 76TH DRIVE	<input type="checkbox"/> Add
		Suite D	<input checked="" type="checkbox"/> Remove
		GAINSVILLE, FL 32607	<input type="checkbox"/> Change
MGR	Sayed Moukhtara	7717 NW 20th Lane	<input checked="" type="checkbox"/> Add
		Gainesville, FL 32605	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Sayed Moukhtara	7717 NW 20th Lane	<input checked="" type="checkbox"/> Add
		Gainesville, FL 32605	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(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.

Signature of a member or authorized representative of a member

SAYED MOUKHTARA 4/15/2022  
Typed or printed name of signee

**Filing Fee: \$25.00**