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### **CT CORP**

#### 3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

01/28/2022

D	late: 01/28/2022
	Acc#I20160000072
Name:	CCP Kissimmee LLC
Document #:	
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Thank you!

#### **COVER LETTER**

TO: Registration Se Division of Cor			
CCP Kissir			
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing	
	indence concerning this matter	_	
	Osvaldo F. Torres, Esq.		
		Name of Person	
	Totres Law, P.A.		
		Firm/Company	<del></del>
	888 Southeast Third Aven	ue, Suite 400	
		Address	
	Fort Lauderdale, Florida 3	3316	
		City/State and Zip Code	· <del></del>
	ozzie@torreslaw.net		- Constant
For further information c	n-mail address: (	to be used for future annual report no all:	nincarony
Osvaldo F. Torres		754 300-5815	
Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed is a check for t	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
<u>Mailing Addres</u> Registration		Street Address: Registration S	Section
Division of C	Corporations	Division of Co	orporations
P.O. Box 632 Tallahassee,		The Centre of 2415 N. Moni	Tallahassee oe Street, Suite 810

Tallahassee, FL 32303

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION [ ]

2022 JAN 28 AM 10: 41

CCP Kissimmee LLC

(Name of the Limited Liability Company as it now appears of our records) (A Florida Limited Liability Company)

[A Florida Limited Liability Company]

The Articles of Organization for this Limited Liability Company	were filed on December 8, 2021 and assign	red	
Florida document number L21000518660			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
N/A			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "L.L.C" or the abbreviation "L.L.C		
Enter new principal offices address, if applicable:	3480 Main Highway		
(Principal office address MUST BE A STREET ADDRESS)	Suite 302		
	Coconut Grove, Florida 33133		
	3480 Main Highway		
Enter new mailing address, if applicable:	Suite 302		
(Mailing address MAY BE A POST OFFICE BOX)	Coconut Grove, Florida 33133		
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	, Florida		
New Registered Agent's Signature, if changing Registered Agent:	•		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with a provided for in Chapter 605, F.S. Or, if this docume	and ent is	
If Cha	nging 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
MGR	Raul A. Ramirez	900 WEST AVENUE, APT 1019	
		MIAMI BEACH, FL 33139	≣Remove
			□Change
MGR	Todd Linden	900 WEST AVENUE, APT 1019	
<del></del>		MIAMI BEACH, FL 33139	≣Remove
		<del></del>	□ Change
MGR	Richard Valdes	900 WEST AVENUE, APT 1019	□Add
		MIAMI BEACH, FL 33139	≣Remove
			□ Change
MGR	CCP Kissimmee GP LLC	3480 Main Highway	■Add
		Suite 302	□Remove
		Coconut Grove, Florida 33133	□Change
			□Remove
			□Change
			□Add
			□Remove
			□ Changa

N/A				
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			<u>-</u>	
	<del></del>			
te: If the date inserted in this	he date of filing:  must be specific and cannot be prior block does not meet the applic Department of State's records	able statutory filing req		
ecord specifies a delayed effectis filed.	tive date, but not an effective ti	ime, at 12:01 a.m. on th	e earlier of: (b) The 90th	day after the
January 26	. <u>2022</u> U			
1-10-	//			
400 p				
	Signature of a member or auth	orized representative of a	member	

Filing Fee: \$25.00