121000523182

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: I Spoke Sonver se on May 12, 2022 Obout the filing fee \$35.00. Mr. Lopetaxes not want a Certificate of Status. He want to Day only \$25.00 Office Use Only



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SECULIANAS OF STATE

A. BUTLER JUN -7 2022

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: ___ 6650 PINE VENTURE LLC DOCUMENT NUMBER: L21000523182 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Luis Lopez Name of Contact Person 6650 PINE VENTURE LLC Firm/ Company 3300 NW 110TH ST Address MIAMI, FL 33167 City/ State and Zip Code 6650pinetreeln@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Luis Lopez Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee ☐\$43.75 Filing Fee & □\$43.75 Filing Fee & ☐S52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

	ED
2HAY 21	DV -

	´ ` OF	· Election
6650	Pine Venture Uc.	2022 MAY 31 PM 5: 49
(<u>Name of the Limi</u>	ted Liability Company as it now appears on ou (A Florida Limited Liability Company)	TALLALIASSE TATE
The Articles of Organization for this Limited L Florida document number <u>L 2100052</u>	iability Company were filed on	and assigned
This amendment is submitted to amend the foll	lowing:	
A. If amending name, enter the new name of	of the limited liability company here:	
The new name must be distinguishable and contain the v	words "Limited Liability Company," the designation	on "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:	
(Principal office address MUST BE A STREE	ET ADDRESS)	
Park and a second control of the second control of		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	<u> </u>	
B. If amending the registered agent and/or agent and/or the new registered office addre		, <u>enter the name of the new registered</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stree	et address
		, Florida
	Cuy	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>	Name	Address	Type of Action
MORM	Luis lopos	3300 NW 110T# St	LAdd
		Miam; F1 33167	□Remove
			□Change
<u> </u>	So Hus Group Holding	33000W 1107#	□Add
	·	Miami, FC 33167	
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			DChange
			□Add
			□Remove
			□Change

ramendu	ng any other information, enter change(s) bere: (Attach additional sheets, if necessary.)

	·
Note: If th	late, if other than the date of filing:
e record spe rd is filed.	ecities a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
	Parch 18th) topz
•	Signature of Amember of anthorized representative of a member
	Luic Lonez
-	Typed or printed name of signee



RECEIVED

2022 HAR 31 PM 12: 11

FLORIDA DEPARTMENT OF STATE
Division of Corporations SEC

SECRETALLY OF STATE
TALLAHASSEE, FL

March 14, 2022

LUIS LOPEZ 3300 NW 110TH ST MIAMI, FL 33167

SUBJECT: 6650 PINE VENTURE LLC

Ref. Number: L21000523182

We have received your document for 6650 PINE VENTURE LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA PROFIT CORPORATION, but your entity is a FLORIDA LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

Letter Number: 222A00006035



RE HVED

FLORIDA DEPARTMENT OF STATE MAY 27 AM 7:49

Division of Corporations

SECRE TALL:

AiE.

May 12, 2022

LUIS LOPEZ 3300 NW 110TH ST MIAMI, FL 33167

SUBJECT: 6650 PINE VENTURE LLC

Ref. Number: L21000523182

We have received your document for 6650 PINE VENTURE LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The titles you have listed for the individuals or business entities which will manage the limited liability company are not acceptable. We cannot accept the terms: partner, officer, owner or member. You must insert the letters "MGRM" for each individual or business entity that is a member and will serve in a managerial capacity. If the individual or business entity is not a member, but will serve in a managerial capacity, you must insert the letters "MGR." We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

Letter Number: 022A00010944



RECEIVED

2022 APR 26 PM 12: 31

SECLEMAS SEE, FL

FLORIDA DEPARTMENT OF STATE Division of Corporations

April 9, 2022

LUIS LOPEZ 3300 NW 110TH ST MIAMI, FL 33167

SUBJECT: 6650 PINE VENTURE LLC

Ref. Number: L21000523182

We have received your document for 6650 PINE VENTURE LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

Letter Number: 822A00008276