# 121000529558

(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.
NOV 19 2024

Office Use Only



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10/29/24--01019--006 \*\*55.00



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		COVER LETTER		
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NORTH A	T BRICKFLL LUCC			
SUBJECT:	Verme of Line	and Liabitely Company	<del></del>	
The enclosed Articles of	Assertaces and Sec(s) are web	naved for filing.		
Please return all correspo	ndesce serversing this metar	to the following:		
	Lors Backler			
		Name of Person	<del></del>	
	Nurth Development Group	HC		
		Funit Cacapany	<del> </del>	
	1200 Brickell Avenue, 18:			
		Address		
	Mismi, FL 33131		<del></del>	
	librack in Chapethale velopmen	City/Nort and Zip Child		
		in the second four figures and annual request modelication	<del>**)</del>	
For further is formation o	concerning this matter, please o	utt.		•
Lon Backler		305 204-1375		
Ngme e	V Person	Area Code Devision Tex	Appene Mander	
Preciosed in a object for t	he following amount:			
(2) \$25 00 Filling Fee	(2) \$30.00 Fiting Fee & Certificate of States	■ \$15.00 Filing Fee & Cest-fiel Copy colorana cryy is arrived;	SoO DI Filing For, Cartificate of Szeros & Certified Copy (addessed copy a excluse)	
Mailton Addre		Street Address:	_	
Registration Division of C P.O. Box 63	Corporations	Registration Section Division of Corpor The Centre of Talls	raions	
fallahassee,		2415 N. Monroe St	treet, State \$10	I.
		Tallahassee, Ft. 32	303	1
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### Get paid up to 7 days earlier with BILL!

Date: 10/15/2024

Check #: 9905529641

Easily create your account and get paid electronically.

Scan the QR code to get started



OR
Go to bill.com/epay and enter this code:

lu102i0q



om: North at Brickell II LLC

y To: FLORIDA DEPARTMENT OF STATE

#### **COVER LETTER**

Registration Section

TO:

Division of C	Corporations		
NORTH	AT BRICKELL I LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corres	spondence concerning this matter	to the following:	
	Lori Buckler		
		Name of Person	
	North Development Group	LLC	
	-	Firm/Company	
	1200 Brickell Avenue, 18t	h Floor	
		Address	
	Miami, FL 33131		
		City/State and Zip Code	
	lbuckler@northdevelopmen		-
		to be used for future annual report notif	fication)
For further information	n concerning this matter, please ca	ill:	
Lori Buckler		305 204-1375 at ()	e Telephone Number
Nam	e of Person	Area Code Daytimo	e Telephone Number
Enclosed is a check fo	r 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 Add Registration Division of P.O. Box 6 Tallahassec	n Section Corporations 327	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations Callahassee e Street, Suite 810

#### ARTICLES OF AMENDMENT TO

#### ARTICLES OF ORGANIZATION **OF**

NORTH AT BRICKELL LLLC

2024 OCT 29 AM 11: 03 (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 I	Liability Company	were filed on 12/16/20	21	and assigned
Florida document number 1.21000529558	<del> </del>			
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name	of the limited liah	oility company here:		
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designat	ion "LLC" or the abbrevi	ation "L.L.C."
Enter new principal offices address, if appli	cable:			<del></del>
(Principal office address MUST BE A STRE	ET ADDRESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	EBOX)			
B. If amending the registered agent and/or	pagistared office	addrace on our rained	e antar tha nama af	the new registered
agent and/or the new registered office addre	* '	address on our record.	s, <u>enter the name or</u>	the new registered
Name of New Registered Agent:	Lori Buckler			
New Registered Office Address:	1200 Brickell A	Avenue, 18th Floor		
		Enter Florida stro	vet address	
	Miami		Florida	
		City	Z	ip Code
New Registered Agent's Signature, if changing	Registered Agent:			
Thereby accept the appointment as register				
provisions of all statutes relative to the pro- accept the obligations of my position as reg				
being filed to merely reflect a change in the	registered office			
company has been notified in writing of thi.	s change.			

Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Ricardo Dunin	4218 NE 2nd Avenue, Miami, FL 33137	□Add
			Remove
			□Change
AMBR	OAK CAPITAL GROUP LLC	1200 Brickell Avenue, 18th Floor, Miami, FL 33131	<b>=</b> Add
			□Remove
			□Change
AMBR	EDIFICA USA 1 LLC	1200 Brickell Avenue, 18th Floor, Miami, FL 33131	<b>=</b> Add
			□Remove
			□Change
AMBR	EDIFICA USA 2 LLC	1200 Brickell Avenue, 18th Floor, Miami, FL 33131	<b>=</b> Add
			Remove
			□Change
AMBR	ARTURO VIDAL	1200 Brickell Avenue, 18th Floor, Miami, FL 33131	<b>≣</b> Add
			□Remove
			□Change
			□Add
			□Remove
			Change

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	te of filing:specific and cannot be prior t	o date of filing or more tha	in 90 days after filing.) Purs	suant to 605.020
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## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION

**OF** 

NORTH AT BRICKELL I 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 I Florida document number L21000529558	Liability Company were	filed on 12/16/202	and assigned	
This amendment is submitted to amend the fol	llowing:			
A. If amending name, enter the new name	of the limited liability co	ompany here:		
The new name must be distinguishable and contain the	words "Limited Liability Con	npany," the designation	on "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if appli	icable:			
(Principal office address MUST BE A STRE	ET ADDRESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	<i>E BOX</i> )			
		-		
B. If amending the registered agent and/or agent and/or the new registered office addresses	ess here:	s on our records,	enter the name of the new registere	
Name of New Registered Agent:	Lori Buckler		,	
New Registered Office Address:	New Registered Office Address: 1200 Brickell Avenue, 18th Floor			
_ <del></del>		Enter Florida stree	t address	
	Miami		, Florida <u>33131</u>	
	Ci	, i,	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.

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
AMBR	Ricardo Dunin	4218 NE 2nd Avenue, Miami, FL 33137	🗆 Add
			<b>=</b> Remove
			Change
AMBR	OAK CAPITAL GROUP LLC	1200 Brickell Avenue, 18th Floor, Miami, FL 3313	l <b>≣</b> Add
			🗆 Remove
			□Change
AMBR	EDIFICA USA 1 LLC	1200 Brickell Avenue, 18th Floor, Miami, FL 3313	l ≣Add
			□Remove
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AMBR	EDIFICA USA 2 LLC	1200 Brickell Avenue, 18th Floor, Miami, FL 3313	l ≣Add
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AMBR	ARTURO VIDAL	1200 Brickell Avenue, 18th Floor, Miami, FL 3313	l ≣Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□ Change

Effective date, if other than the date of filing:  (optional)  (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 605.020  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records.  The effective date on the Department of State's records.  The effective date on the date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the dis filed.  September 9  2024  Signature of a number or authorized representative of a member  Eduardo Vargas, President				-1-	<u>-</u>
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	Dated September 9	, 2024	-:		
			\-		
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