## L 2,2 0000 23108

(Requestor's Name)
(Address)
(Address)
(Addison)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Social State Plants)
0.00
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
<u> </u>

Office Use Only



000419127000

11/17/23--01028--010 \*\*25.00

2023 Y 9Y 1 7 LT 10: 0:

0 12/2/2023

## **COVER LETTER**

TO:

Tallahassee, FL 32314

TO: Registration Se Division of Cor						
SUBJECT:	7200 NW	177 ST, LLC				
SOBSECT:		ited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return all correspo	ndence concerning this matter	to the following:				
	Reinald	do Castellanos,	Esq.			
	Reinald	do Castellanos, Name of Person do Castellanos,	P.A.			
		Firm/Company				
	9960	SN 40 ST.				
		Address				
	Miami	1, FL 33/	65			
	E-mail address: (	City/State and Zip Code  Cas[e]   a nos   aw. to be used for future annual report notion	CON (fication)			
	oncerning this matter, please co	all:				
Keinaldo	Castellanos	at (305 ) 223-	8744			
Name of	f Person	Area Code Daytin	ne Telephone Number			
Enclosed is a check for th	e following amount:					
☑ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
Mailing Addres		Street Address:				
Registration S Division of C		Registration Se Division of Cor				
P.O. Box 632		The Centre of Tallahassee				

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

7200 N	VW 177	187, LLC		24 17 MH 10: 03
( <u>Name of the Limited Li</u> (A F	ability Company orida Limited Lia	as it now appears on our bility Company)	records.)	
he Articles of Organization for this Limited Liabili Iorida document number <u>L 72<i>0000 231</i></u>	ty Company w ' <i>OS</i> '.	-	10/2022	and assigned
his amendment is submitted to amend the followin	g:			
. If amending name, enter the new name of the	limited liabili	ty company here:		
he new name must be distinguishable and contain the words	"Limited Liability	Company," the designation	on "LLC" or the abb	reviation "L.L.C."
inter new principal offices address, if applicable	:			
Principal office address MUST BE A STREET A	DDRESS)	<u> </u>		
			<u> </u>	
nter new mailing address, if applicable:				
<u>Mailing address MAY BE A POST OFFICE BOX</u>	<u>k)</u>			
			<del></del>	
. If amending the registered agent and/or regis gent and/or the new registered office address he		ldress on our records	, enter the name	of the new registo
Name of New Registered Agent:		· <del></del>		
New Registered Office Address:		Enter Florida stre	et address	
		ime i norma su c		
			, Florida	

## 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>	Address	Type of Action
MGR	Fernando Marcelo	9960 SW 40 ST. Miami, Fl 37/65	₩Add
	Alfuzzi Perez	Miami, Fl 37/65	□ Remove
			□Change
		-15-15-15-15-15-15-15-15-15-15-15-15-15-	🗆 Add
		· · · · · · · · · · · · · · · · · · ·	□Remove
			□Change
			🗆 Add
			□Remove
			□Change
<del>,</del>			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□ Remove

									-
									_
									-
					<del></del>				-
	· · ·	<u> </u>							-
	<del></del>								
		<del></del> _							
	-				<u>-</u>		_		•
	<del></del>			<del></del> -				<del></del>	-
		<del>.</del>				<del></del>			Ē
							<u></u>		
				•					-
	<del></del>								-
									-
								<u>-</u>	
ective (	date, if other t	han the date o	f filing:				(optional)		
reffectiv te: If th	e date is listed, the	e date must be spec in this block doe	rific and cann	ot be prior to	date of filing or	more than 90	days after filing	.) Pursuant to 605	0207
		on the Departme			ie siaiatory ii	ing requirem	ems. ms date	will not be list	cu as
cord sp s filed.	ecifies a delayed	I effective date, l	out not an e	ffective time	e, at 12:01 a.n	n, on the earl	er of: (b) Th	ne 90th day afte	r the
	October	<u> 30</u>	<i></i>	023					
ed		. 10							
ed		<b>U</b> H							
ted			ra of a man-	or or outhout	ed representat	of	_		