Florida Department of State  Division of Corporations  Elegtronic Filing Coverished		Florida Department of Stat	te
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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SOSME ACCOUNTING & TAX SERVICES LLC

Account Number : I20200000102 Phone : (954)998-1035 Fax Number : (954)573-1480

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Fmail	Address:		

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SFL HOSPITALITY DEVELOPMENT LLC

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- - -	Estimated Charge	\$25.00

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Electronic Filing Menu Corporate Filing Menu

Help

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## COVER LETTER\*

TO:		istration Section of Corp		•	
		SFL HOSPIT	FALITY DEVELOPMENT LI	LC	
SUBJE	CT:		Name of Limit	ed Liability Company	
			SPITALITY DEVELOPMENT LLC  Name of Limited Liability Company  of Amendment and fee(s) are submitted for filing.  spondence concerning this matter to the following:  MANUEL TEJERA JR  Name of Person  SFL HOSPITALITY DEVELOPMENT LLC  Firm/Company  224 FLAGLER DRIVE  Address  MIAMI SPRINGS FL 33166  City/State and Zip Code  MANUEL TEJERA SI@GMAIL COM  E-mail address: (to be used for future annual report notification)  in concerning this matter, pleuse call.  IR  1786  Area Code  Area Code  Certificate of Status  Certificate Copy (additional copy is enclosed)  Street Address:  Street Address:		
				Name of Person	<del></del>
			SEL HOSPITALITY DEVI	ELOPMENT LLC	
			224 FLAGLER DRIVE		
				Address	
			MIAMI SPRINGS FL 3310	56	
			MANUEL.TEJERA91@GN		<del></del>
			-		)
For furt	ther is	nformation co	ncerning this matter, please ca	11.	
MANU	JEL T	TEJERA JR			
		Name of	Person	Area Coxic Daytime Telep	hone Number
Enclose	ed is a	e check for the	following amount:		
<b>₽</b> \$2:	5.00 I	Filing Fee		Certified Copy	Certificate of Status & Certified Copy
		dling Address gistration S		Street Address: Registration Section	

Registration Section
Division of Corporations
P.O. Box 5327
Tallahassee, FL 32314

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

SFL HOSPITALITY DEVELOPMEN				
(Name of the Limited (A	Linbility Compar Florida Limited L	iv as It now appears on our receiability Company)	ords <u>.</u> )	
The Articles of Organization for this Limited Liab Florida document number <u>L22000050761</u>	bility Company	were filed on <u>02/09/2022</u>	a	nd assigned
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t	he limited liabi	lity company here:		
The new name must be distinguishable and contain the wor	rds "Limited Liabili	ity Company," the designation "I	.l.C" or the abbrevia	tion "L.L.C."
Enter new principal offices address, if applical	ole:	224 FLAGLER DRIVE		
		MIAMI SPRINGS FL 3310	oh .	
			· · · · · · · · · · · · · · · · · · ·	
Enter non-mailing address if applicable		224 FLAGUER DRIVE		
	OX)	MIAMI SPRINGS FL 3316	56	
B. If amending the registered agent and/or regagent and/or the new registered office address	gistered office a <u>here</u> :	iddress on our records, <u>en</u>	ter the name of t	he new registered
Name of New Registered Agent:	the following:    Description   City   Control			
New Registered Office Address:	224 FLAGLER	DRIVE	<i>V</i> 25	
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office addressent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  MANUEL TEJERA  224 FLAGLER DRIV  MIAMI SPRINGS  New Registered Agent:  I hereby accept the appointment as registered agent and agree to provisions of all statutes relative to the proper and complete perfet			2022	
	MIAMI SPRINGS Florida 33166		Florida 33166	<b>I</b>
New Registered Agent's Signature, if changing Re	egistered Agent:	City	726 03 03 11	a Codelali
provisions of all statutes relative to the proper accept the obligations of my position as regist	r and complete tered agent as p gis <mark>tere</mark> d office	performance of my duties provided for in Chapter 66	, and I am famil 15, F.S. Or, if <b>B</b> i	i <u>a</u> r with and Sylocument is

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

Title	<u>Name</u>	Address	Type of Action
MGR	MANUEL TEJERA JR	224 FLAGLER DRIVE	□Λd‹i
		MIAMI SPRINGS FL 33166	□Remove
			☐ Change
			□Add
			□Remove
			Change
			□ Remove
			☐ Change
			[] Add
			□Remove
			Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			[F]Change

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		<b></b>
Effective date, if other If an effective date is listed, to Note: If the date inserted document's effective date.		
ocument's effective date on the Department of State's records record specifies a delayed effective date, but not an effective tild is filed.		_
E. Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than Note; If the date inserted in this block does not meet the applicable statutory filing required document's effective date on the Department of State's records		_
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	tive date, if other than the date of filing:  [Optional]  [Rective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after tiling.) Pursuant to 605,0207 (  [If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records  and 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 filed.	
Effective date, if other than the date of filing:  (Optional)  (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 tiling.) Pursuant to 605.02  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records  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 cord is filed.	_	
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Note; II U	he date inserted in this block does not meet the applicable statutory thing requirements, this cane with the	05.020 isted as
		fter the
	03/22 / 2022//	
Dated		
Oated	Signature of a member or authorized representative of a member	

Filing Fee: \$25.00