H220000 83917) **Division of Corporations** 3/4/22, 3:47 PM Florida Department of State vision of Corporations et Bnic

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119405	Account Name : SERBER & ASSOCIATES, P.A.	
	Account Number : I2000000083	•
	Phone : (305)932-6262	-
	Fax Number : (305)933-9393	. –
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Enter	the email address for this business entity to be used nual report mailings. Enter only one email address pl	ease.**

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BUENA ONDA CASA, LLC

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4220000 839173

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BUENA ONDA CASA, 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 Liability Company were filed on <u>02/15/2022</u> and assigned Florida document number <u>L22000061685</u>.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

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 address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street add	ress
		Florida
	City	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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

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<u>Title</u>	Name	Address	Type of Action
MGR	Jorge Basile	2875 NE 191st Street	🖬 Add
		Suite 801	Remove
		Aventura, FL 33180	
MGR	Stella Maris Castro	2875 NE 191st Street	🛱 Add
		Suite 801	Remove
		Aventura, FL 33180	
AR	S & A Company Management, LLC	2875 NE 191ST ST STE 80	1 Add
		AVENTURA, FL 33180	Remove
			🗆 Add
			Remove
			Add
			🗋 Remove
			Add
			_ Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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he effective date must be specific, cannot the date this document is filed by the Flori	be prior to date of receipt or filed date and cannot be more	(optional) than 90 days after
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The effective date must be specific, cannot the date this document is filed by the Flori Dated March 4	be prior to date of receipt or filed date and cannot be more da Department of State) 2022 ignature of a meinber or authorized representative of a me	than 90 days after

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