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FILLETY 1072 OCT IT PH 2: 32 SECRETARY OF STATE TALLAHASSEE, FL

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT:

Arcanas Miami LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Maria Laura Narracci

Name of Person

Arcanas Miami LLC

Firm/Company

255 Sunrise Dr #205

Address

Key Biscayne FL 33149

City/State and Zip Code

mlauranarracci@gmail.com

E-mail address: (to be used for future annual report notification)

at

For further information concerning this matter, please call:

Maria Laura Narracci

Name of Person

786 2866255 Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

S25.00 Filing Fee

S30.00 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)

<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

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

Arcanas Miami LLC

(<u>Name of the Limited Liability Company as it now appears on our records.</u>) (A Florida Limited Liability Company)

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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)

255 Sunrise Dr #205		
Key Biscayne FL 33149	SE	
	CREOC	
255 Sunrise Dr # 205	TARY F	
Key Biscayne FL 33149		
	FILE 32	

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:	Maria Laura Narracci		
New Registered Office Address:	255 Sunrise Dr #205		
<u> </u>	Enter Florida street address		
	Key Biscayne	, Florida ³³¹⁴⁹	
	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.

nue

If 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</u> being added <u>or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	María Laura Narracci	255 Sunrise Dr # 205	□ Add
		Key Biscayne FL 33149	Петоче
			Change
MGR	Deolinda Maria Ale	255 Sunrise Dr #205	= Add
		Key Biscayne FL 33149	[]Remove
			Change
MGR	Cintia L Pastuskovas	247 East Enid Dr	
		Key Biscayne FL 33149	Add TALLAR OC TREMOVER
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			🗆 Remove
			Change

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

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E. Effective date, if other than the date of filing: ______(optional) (If an effective date is listed, the date must be specifie and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If 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 record is filed.

October 12 Dated	2022	
	A aller a'	
	Signature of a member or authorized representative of a member	
	Signature of a memory of authorized representative of a memoer	
Maria Laura Narra	acci	
·	Typed or printed name of signee	