

L22000128728

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

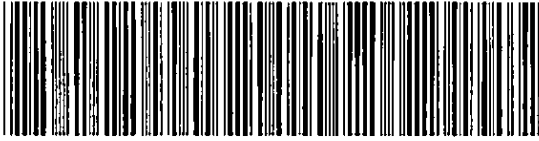
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
2022 APR -6 AM 11:06
CLERK OF STATE
TALLAHASSEE, FL

RECEIVED
2022 APR -6 PM 3:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend

APR 07 2022
ALBRITTON

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

DATE 04/06/2022

****WALK IN****

ENTITY NAME 3760 Royal Palm Ave LLC

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXXX

Plain Copy

Certified Copy

Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certificate of Good Standing

****APOSTILLE' / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$25

ACCOUNT #: 120160000072

S R JH

Please call Tina at the above number for any issues or concerns. Thank you so much!

COVER LETTER

**TO: . Registration Section
Division of Corporations**

SUBJECT: 3760 Royal Palm Ave 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:

Jonathan S. Trabit, Esq.

Name of Person

Thomas G. Sherman, P.A.

Firm/Company

90 Almeria Avenue

Address

Coral Gables, FL 33134

City/State and Zip Code

farukaa@yahoo.co.uk

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

For further information concerning this matter, please call:

Jonathan Trabit

305 448-5898
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for 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 Address:

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**

3760 Royal Palm Ave 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 March 29, 2022 and assigned Florida document number L22000128728.

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)

90 Almeria Avenue

1st Floor

Coral Gables, FL 33134

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

90 Almeria Avenue

1st Floor

Coral Gables, FL 33134

FILED
2022 APR -6 AM 11:06
SECRETARY OF STATE
TALLAHASSEE, FL

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 address

_____, **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 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>	<u>Address</u>	<u>Type of Action</u>
MGR	Faruk Agoro	3760 Royal Palm Ave	<input type="checkbox"/> Add
		Miami Beach, FL 33140	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Christina Agoro	3760 Royal Palm Ave	<input type="checkbox"/> Add
		Miami Beach, FL 33140	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Frauk Ajibola Tiwatope Agoro	90 Almeria Avenue	<input checked="" type="checkbox"/> Add
		1st Floor	<input type="checkbox"/> Remove
		Coral Gables, FL 33134	<input type="checkbox"/> Change
MGR	Christiana Oluwakemi Agoro	90 Almeria Avenue	<input checked="" type="checkbox"/> Add
		1st Floor	<input type="checkbox"/> Remove
		Coral Gables, FL 33134	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

