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| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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COVER LETTER

TO:

Registration Section

| Div | ision of Cor | porations | | | | |
|--------------------------|-----------------------------------|---|---|---|--|--|
| | ERENCOR | 01-RE LLC | | | | |
| SUBJECT: | Name of Limited Liability Company | | | | | |
| The enclosed | LArticles of | Amendment and fee(s) are sub | omitted for filing | | | |
| | | | | | | |
| Please return | all correspo | ondence concerning this matter | to the following: | | | |
| | | TUIDLY PEREZ | | | | |
| | | | Name of Person | | | |
| | | ERENCOR01-RE LLC | | | | |
| | | | Firm/Company | | | |
| | | 1081 NW 75TH TER | | | | |
| | | | Address | | | |
| | | PLANTATION, FL 3331; | 3 | | | |
| | | | City/State and Zip Code | | | |
| | | info@gitaxes.com | | | | |
| | | | to be used for future annual report no | otification) | | |
| For further in | iformation c | oncerning this matter, please c | ali: | | | |
| JEAN M GUARNIZO | | 754 946-9004 at () | | | | |
| | Name o | f Person | Area Code Dayti | me Telephone Number | | |
| Enclosed is a | check for th | ne following amount: | | | | |
| ≣ \$25.00 I | filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) | | |
| | iling Addres | | <u>Street Address:</u> Registration S | ection | | |
| Division of Corporations | | | Division of Corporations | | | |
| |). Box 632 lahassee, l | | The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 | | | |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| ERENCOR01-RE LLC | | |
|---|---|----------------------------------|
| (<u>Name of the Limited Liability Comp</u> (A Florida Limited | any as it now appears on our reco Liability Company) | rds.) |
| The Articles of Organization for this Limited Liability Company Torida document number 1.22000155151 | were filed on 03/31/2022 | and assigned |
| his amendment is submitted to amend the following: | | |
| . If amending name, enter the new name of the limited liab | oility company here: | |
| he new name must be distinguishable and contain the words "Limited Liab | lity Company," the designation "LI | .C" or the abbreviation "L.L.C." |
| nter new principal offices address, if applicable: | | |
| Principal office address MUST BE A STREET ADDRESS) | | |
| | | AL |
| | | |
| nter new mailing address, if applicable: | | > |
| Tailing address MAY BE A POST OFFICE BOX | | |
| raning gausess just the New York Control of the books | | T (2) |
| | | |
| . If amending the registered agent and/or registered office gent and/or the new registered office address here: | address on our records, <u>entc</u> | |
| | | |
| Name of New Registered Agent: | | |
| New Registered Office Address: | Enter Florida street addr | ess. |
| | | |
| | , I | Florida 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, <u>enter the title, name, and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|------------------------|-------------------------|----------------|
| MGR | TUIDLY PEREZ | 11750 NW 57TH ST | ≅ Add |
| | | Coral Springs, FL 33076 | □Remove |
| | | | |
| AMBR | MIRNA COELLO RODRIGUEZ | 1081 NW 75TH TER | |
| | | PLANTATION, FL 33313 | Remove |
| | | | C)Change |
| | | | []Add |
| | | | TALLAHASSEY |
| | | | SEE GE PAAdd D |
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| ective date, if other than the a effective date is listed, the date mus | it be specific and cannot be prior | to date of filing or more | optiona (optiona han 90 days after fili | ng.) Pursua | int to 605 | 5.020 |
| te: If the date inserted in this blooment's effective date on the D | ock does not meet the applic epartment of State's records | able statutory filing re | quirements, this da | te will no | t be list | ed a |
| | | | | | | |
| cord specifies a delayed effective | e date, but not an effective t | ime, at 12:01 a.m. on t | he earlier of: (b) | The 90th | day afte | er the |
| s filed. | | | | | | |
| ed May 24 | 2022 | | | | | |
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Filing Fee: \$25.00