

L22 0000251506

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

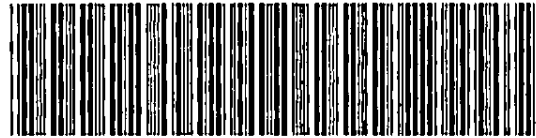
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CLERK OF COURT
COURT OF COMMON PLEAS
JANUARY 2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LOCALS RE HOLDINGS, 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:

ANDREW YAGODA, ESQ

Name of Person

YAGODA + LEHRMAN LAW FIRM, LLC

Firm/Company

232 ANDALUSIA AVE., SUITE 201

Address

CORAL GABLES, FL 33134

City/State and Zip Code

AYAGODA@YAGODALAW.COM

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

For further information concerning this matter, please call:

ANDREW YAGODA

305 460-4447
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

22 SEP 20 PM 2:05

FLORIDA
DIVISION OF CORPORATIONS

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

LOCALS RE HOLDINGS, 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 06/01/2022 and assigned
Florida document number L22000251506.

This amendment is submitted to amend the following:

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

SGRD, LLC

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:

10015 SUNSET DR

(Principal office address MUST BE A STREET ADDRESS)

MIAMI, FL 33173

Enter new mailing address, if applicable:

10015 SUNSET DR

(Mailing address MAY BE A POST OFFICE BOX)

MIAMI, FL 33173

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:

n/a

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	CHRISTINE MARQUES	10015 SUNSET DR	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33173	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MICHAEL ANDERSON	10015 SUNSET DR	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33173	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ERIC HAAS	10015 SUNSET DR	<input type="checkbox"/> Add
		MIAMI, FL 33173	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

23 SEP 30 PM 2:05
RECEIVED BY CORP. REGISTRATION

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

n/a

22 SEP 20 PM 2:05

FILED FOR RECORDING

E. 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 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.

Dated September 16, 2022



Signature of a member or authorized representative of a member

Andrew Yagoda, as attorney for Eric Haas

Typed or printed name of signer

Filing Fee: \$25.00