

L22000306421

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

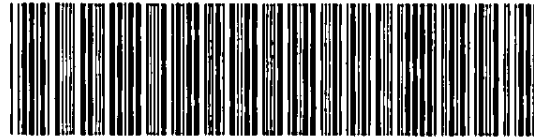
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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22 SEP -1 PM 2:11  
DIVISION OF CORPORATIONS

Onadjefe Alli  
Tierra Dorada LLC  
10632 W 35<sup>th</sup> Way,  
Hialeah, FL 33018

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

August 27, 2022

**RE: AMEUREMENT OF LLC – REMOVAL OF MANAGER**

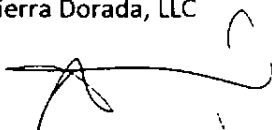
I am writing this letter to request that the LLC filing for "Tierra Dorada, LLC" is amended to remove the manager "Zenab Dankaka".

Company Name – Tierra Dorada, LLC  
Document Number – L22000306421  
Daytime Phone Number – 8164570667  
Return Address – 10632 W 35<sup>th</sup> Way, Hialeah, FL 33018  
Email Address – [bumiedwin@hotmail.com](mailto:bumiedwin@hotmail.com)

The required \$30 fee for filing and a certified copy is also included.

Thank you,  
Onadjefe Alli

Tierra Dorada, LLC



22 SEP - 1 PM 2:11  
DIVISION OF CORPORATIONS  
OFFICE OF STATE

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: TIERRA DORADA 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:

ONADJEFE ALLI  
Name of Person  
TIERRA DORADA LLC  
Firm/Company  
10632 W 35TH WAY  
Address  
HIALEAH, FL 33018  
City/State and Zip Code  
BUMIEDWIN@HOTMAIL.COM  
E-mail address: (to be used for future annual report notification)

22 SEP - 1 PM 2:11  
DIVISION OF CORPORATIONS  
STATE OF FLORIDA

For further information concerning this matter, please call:

ONADJEFE ALLI  
Name of Person  
I 8164570667  
at ( )  
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**

TIERRA DORADA 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 JULY 11, 2022 and assigned  
Florida document number 1.22000306421.

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)

**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

**MGR = Manager**  
**AMBR = Authorized Member**

**AMBR = Authorized Member**

22 SEP 11 PM 2:11  
Change Add Remove

SECTION OF STATE  
DIVISION OF CORRECTIONS

22 SEP -1 PM 2:11

22 SEP - 1 PM 2:11

SECTION OF STAFF  
DIVISION OF CORPORATIONS

(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)

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 AUGUST 22, 2022

ONADJEFE ALLI

Typed or printed name of signee