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| (Requestor's Name) |
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| ☐ PICK-UP ☐ WAIT ☐ MAIL |
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| (Business Entity Name) |
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| Special Instructions to Filing Officer. |
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COVER LETTER

| | | ition Sec of Corp | | | | |
|---|----------------|----------------------|---|---|---------------------|--------------------|
| eup irz | | rio Home | s LLC | | | |
| SUBJEC | .1: | | Name of Lim | ited Liability Company | | |
| The enck | osed Art | icles of A | mendment and fee(s) are sub | mitted for filing. | | |
| Please re | turn all c | orrespon | dence concerning this matter | to the following: | | |
| | | | Sofia Vasquez | | | |
| | Name of Person | | | | ···· | |
| | | | ZenBusiness INC | | | |
| Firm/Company | | | | | | |
| | | | 336 E. College Ave Suite . | 301 | | r7 |
| | | | | Address | | |
| Tallahassee, FL 32301 | | | | | | 2973 JUN 26 |
| | | | | City/State and Zip Code | | 26 |
| | | | fulfillment@zenbusiness.co | | | P:1 |
| For furth | er inforn | nation cor | E-mail address: (ncerning this matter, please ca | to be used for future annual report not all: | itication) | 57.42 40 th 11d |
| c/o Zenl | Business | INC | | 844 493-6249 | | ri + |
| | | Name of I | ⁹ erson | | ie Telephone Number | |
| Enclosed | is a che | ck for the | following amount: | | | |
| ■ \$25.0 | 00 Filing | Fce | ☐ \$30,00 Filing Fee & Certificate of Status | ☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed) | Certified | e of Status & |
| | | Address: | | <u>Street Address:</u> Registration Se | ection | |
| Registration Section Division of Corporations | | | | Division of Co | | |
| I | P.O. Bo | ox 6327 | | The Centre of Tallahassee | | |
| Tallahassee, FL 32314 2415 N. Monroe Street, Su | | | | e Street, Suite 81 | 10 | |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Barno Homes LLC | | |
|--|--|---------------------------|
| (<u>Name of the Limited Liability Compa</u> (A Florida Limited I | ny as it now appears on our records.) hability Company) | |
| the Articles of Organization for this Limited Liability Company lorida document number 1.22000428528 | were filed on 10/04/2022 | and assigned |
| his amendment is submitted to amend the following: | | |
| . If amending name, enter the new name of the limited liab | ility company here: | |
| he new name must be distinguishable and contain the words "Limited Liabil | ity Company," the designation "LLC" or | the abbreviation "L.L.C." |
| Inter new principal offices address, if applicable: | | |
| Principal office address MUST BE A STREET ADDRESS) | | :: N 5 |
| | <u> </u> | |
| | | |
| nter new mailing address, if applicable: | | |
| Mailing address MAY BE A POST OFFICE BOX) | - | |
| | | |
| If amending the registered agent and/or registered office agent and/or the new registered office address here: | ddress on our records, enter the | name of the new regist |
| | | |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Florida street address | |
| | Floric | |
| | 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> | Address | Type of Action |
|--------------|-------------------|--------------------------------------|-----------------|
| AMBR | SEMERENE, IGNACIO | 168 SOUTHEAST 1ST STREET, SUITE 1202 | 🗆 Add |
| | | MIAMI, FL 33131 | ≅Remove |
| | | | □Change |
| AMBR | BORJA, EDUARDO | 3571 NE 19th Ave. | □Add |
| | | Oakland Park, FL 33308 | □Remove |
| | | | = Change |
| | | . | □Add |
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| ctive date, if other than the | | | (option | |
| flective date is listed, the date mu : If the date inserted in this b ment's effective date on the fi | lock does not meet the a | applicable statutory f | iling requirements, this c | ate will not be listed |
| | | | | |
| ord specifies a delayed effection | e date, but not an effec | tive time, at 12:01 a. | m. on the earlier of: (b) | The 90th day after the |
| filed. | | | | ~ n |
| , 06/15 | 2023 | | | 23 |
| d | | · · | | 92 Euf 1666 |
| /s/ Eduardo Borja | | | | 26 |
| ro countrie Dulla | | | | 7 |
| | Signature of a member o | r authorized representa | tive of a member | |

Filing Fee: \$25.00