# (23000007356

(Re	questor's Name)	
(Ad	dress)	
( )	<b>,</b>	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	MAIT	MAIL
	<del></del>	<del></del>
(Bu	siness Entity Name	e)
(Do	cument Number)	
Certified Copies	Certificates d	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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### **COVER LETTER**

TO: Registration S Division of Co			
	L MANAGEMENT LLC		
SUBJECT:	Name of Lim	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Gonzalo Zabala		
		Name of Person	
		Firm/Company	<del></del>
	2020 N Bayshore Dr		
	<u></u>	Address	<del></del>
	Miami FL 33137		
		City/State and Zip Code	
	gzabala@mveapitalgroup.ed	om to be used for future annual rep	
For further information of	n-mair address. ( concerning this matter, please c		ort norneauon)
Gonzalo Zabala		78658 ar ()	356357
Name	of Person	Area Code	Daytime Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclos	S60.00 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

2023 JUN 13 AM 6: 35

#### G CAPITAL MANAGEMENT LLC

(Name of the Limited Liability Company as it now appears on our records).

(A Florida Limited Liability Company)

	**************************************	117
The Articles of Organization for this Limited Liability Company	were filed on June 06,2023	and assigned
florida document number 1.23000007356		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
AV Homes 2 LLC		
he new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "Ll	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2020 N Bayshore Dr	
Principal office address MUST BE A STREET ADDRESS)	Miami FL, 33137	1
	· · · · · · · · · · · · · · · · · · ·	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>entc</u>	er the name of the new regis
Name of New Registered Agent: Italo Bastidas	Italo Bastidas	
New Registered Office Address: 10620 NW 88t	h St. Unit 105.	
	Enter Florida street addr	CSS
Doral	I	Florida 33178
	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, Sunature 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
MGR	ITALO BASTIDAS	10620 NW 88th St. Unit 105, Doral, FL. 33178	<b>a</b> Add
			□Remove
			Change
	<u> </u>		□Add
			□Remove
			□ Change
			□Add
			□ Remov <b>ę</b>
			□Chang <b>e</b>
			🗖 Add
			🗀 Remo <b>ve</b>
			□ Change
			DAdd
			□Remove
			🗆 Change
			□Add
			□Remove
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 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 JUNE 6

Signature of a member or authorized segmentative of a member

TALO BASTIDAS

Typed or printed name of signee

Filing Fee: \$25.00