(Re	equestor's Name)	<del></del>
(Ad	ldress)	<del></del>
(Ad	(dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to	<del>-</del>	
	J. HOR'	NE 4 2023

Office Use Only



300405992323

2023 AFR 13 PM 3: 11

RECEIVED

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

FIIONE: 650-556-1500
ACCOUNT NO. : 12000000195
REFERENCE : 670757 7732494
AUTHORIZATION Springle man
COST LIMIT : OS 25.00
ORDER DATE : April 12, 2023
ORDER TIME : 9:23 AM
ORDER NO. : 670757-005
CUSTOMER NO: 7732494
DOMESTIC AMENDMENT FILING
NAME: AREAS ATL GROUP JV, LLC
EFFECTIVE DATE:
XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Eyliena Baker EXT#

EXAMINER'S INITIALS: \_

## **COVER LETTER**

	Registration Division of C	Section Corporations			
SHRIFC	AREAS	ATL GROUP JV, LLC			
SUBJECT: Name of Limited Liability Company					
The enclo	os <del>e</del> d Articles (	of Amendment and fee(s) are su	bmitted for filing.		
		spondence concerning this matter	_		
		Legal Dept.			
			Name of Person	<del></del>	
		AREAS ATL GROUP JV	, LLC		
			Firm/Company	<del></del>	
		5301 Blue Lagoon Drive	Suite 690		
			Address	···	
		Miami, FL 33126			
		<del></del>	City/State and Zip Code		
		gustavo.bernardez@areas.c	com		
		E-mail address:	to be used for future annual report not	ification)	
For furthe	r information	concerning this matter, please of	all:		
Gustavo I	Bernardez		786 810-9405		
	Name	of Person	Area Code Daytin	ne Telephone Number	
Enclosed i	s a check for	the following amount:			
<b>■ \$</b> 25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (udditional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Iailing Addre		Street Address: Registration Se	ction	
D	ivision of 0	Corporations		Division of Corporations	
	.O. Box 63		The Centre of T		
1	allahassce,	FL 32314	2415 N. Monro	e Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



AREAS ATL GROUP JV, 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 02/08/2023 and assigned Florida document number L23000058711 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 "LLC." 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

## 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>	Name	Address	Type of Action
MGR	Jose Alberto Serratos	5301 Blue Lagoon Drive Suite 690	<b>=</b> Add
		Miami, FI. 33126	□Remove
			□Change
MGR Richard Schneider	Richard Schneider	5301 Blue Lagoon Drive Suite 690	
	Miami, FL 33126	□Remove	
			□Change
<del>-</del>			□Add
			□Remove
			□Change
			□Add
		<del></del>	□Remove
			☐ Change
			🗆 Add
			□Remove
			☐ Change
<del></del>		<del> </del>	□Add
			□Remove

<i>,</i> 11	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(If an e	tive date, if other than the date of filing:  (optional)  flective 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)  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records.
the reco	ord 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 filed.
Dates	April 12 , 2023.
	Signature of a member or authorized representative of a member
	Gustavo Barnardez

Filing Fee: \$25.00