L2300064235

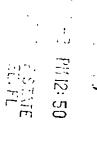
| (Requestor's Name) |
|---|
| |
| (Address) |
| |
| (Address) |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| <u> </u> |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| (Dusiness Linky Walle) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
| |
| |
| Special Instructions to Filing Officer: |
| |
| |
| |
| |
| |
| |
| |

Office Use Only



200435220262

99/03/24--01039--007 **25.00



19 HUMT 25/25/21/ 555 NE 15TH STREET, SUITE CU-19, MIAMI, FL 33132 PHONE: (786) 490-2500 FAX: (786) 490-2501

aparra@parra-cpa.com

August 29, 2024

Registration Section STATE OF FLORIDA – DIVISION OF Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Via FedEx 7782 5559 8262

RE: ODILAC MIAMI, LLC

Document Number L23000064235

Dear Sir or Madam:

This is in regard to the enclosed Amendment changing the name of ODILAC MIAMI, LLC to COPPER POINT BUILDERS LLC.

The requested documents are hereby attached:

lableto Pana, CPA

- 1. Articles of Amendment to Articles of Organization of ODILAC MIAMI, LLC
- 2. \$25 Filing Fee Check payable to FLORIDA DEPARTMENT OF STATE
- 3. Certificate of Dissolution of COPPER POINT BUILDERS LLC
- 4. Name Release letter, by COPPER POINT BUILDERS LLC duly executed and notarized

Please note that both ODILAC MIAMI, LLC and COPPER POINT BUILDERS LLC were organized, and 100% owned/operated by Carlos R. Rivera.

Please do not hesitate to contact the undersigned, at (786) 490-2841, should you require additional information.

Yours truly,

Adalberto Parra

Principal

AP:mp

Encls.

COVER LETTER

TO:

Registration Section Division of Corporations

| SUBJECT: | ODILA | C MIAMI, LLC | | | | | |
|------------------------------|--|---|---|--|--|--|--|
| | Name of Lin | ited Liability Company | | | | | |
| The enclosed Articles of | Amendment and fee(s) are sub | unitted for filing | | | | | |
| | ondence concerning this matter | _ | | | | | |
| r lease return an correspo | ndence concerning this maner | to the following. | | | | | |
| | | Adalberto Parra, CPA | | | | | |
| | | Name of Person | | | | | |
| | AD | ALBERTO PARRA CPA, LLC | | | | | |
| | | Firm/Company | ************************************** | | | | |
| | S | 55 NE 15th ST, Ste. CU-19 | | | | | |
| | | Address | | | | | |
| | | Miami, FL 33132 | | | | | |
| | City/State and Zip Code | | | | | | |
| | F-mail address: t | to be used for future annual report not | ification) | | | | |
| For further information c | concerning this matter, please c | | Treation) | | | | |
| | | | | | | | |
| | Parra, CPA | 786 490-2500 at () | 10.4 | | | | |
| Name () | of Person | Area Code Daytin | ne 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 enclosed) | ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) | | | | |
| Mailing Address | | Street Address: | vation | | | | |
| Registration 9 Division of C | | _ | Registration Section Division of Corporations | | | | |
| P.O. Box 632 | 27 | The Centre of | Fallahassee | | | | |
| Tallahassee, I | FL 32314 | 2415 N. Monroe Street, Suite 810 | | | | | |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| ODILAC MIAMI, | LLC | | |
|---|---------------------------------------|-------------------------|------------------------------|
| (Name of the Limited Liability Compan (A Florida Limited Li | y as it now appea ability Company) | rs on our records.) | |
| he Articles of Organization for this Limited Liability Company v | vere filed on | 02/03/2023 | and assigned |
| lorida document number 1.23000064235 | | | |
| nis amendment is submitted to amend the following: | | | |
| . If amending name, enter the new name of the limited liabil | ity company h | ere: | |
| COPPER POINT BUILDE | RS LLC | | |
| e new name must be distinguishable and contain the words "Limited Liability | ty Company," the c | lesignation "LLC" c | or the abbreviation "L.L.C." |
| nter new principal offices address, if applicable: | | | 7 73 |
| Principal office address MUST BE A STREET ADDRESS) | | | |
| | · | | |
| | | | |
| nter new mailing address, if applicable: | | | |
| Mailing address MAY BE A POST OFFICE BOX | | | 7 7 7 |
| Tuning duaress MAT DE ATOST OFFICE BOAY | | · - | 7 H 50 |
| | | | |
| . If amending the registered agent and/or registered office acgent and/or the new registered office address here: | ddress on our r | ecords, <u>enter th</u> | e name of the new regist |
| | | | |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | Entag Ela | rida street address | |
| | Emer F10 | i aa sireei aaaress | |
| | City | , Flor | ida |
| | 1 1111 | | (ID L OO) |

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 |
|--------------|-------------|---------|-------------------------|
| | | - | □Add |
| | | | □Remove |
| | | | ☐Change |
| | | | □Add |
| | | | Remove |
| | | | Change |
| | | | □Add |
| | | | ∷' □Remove |
| | | | ☐ Change |
| | | | ☐ Change |
| | | | Add Signature Of Remove |
| | | | Change |
| | | | □Add |
| | | | □Remove |
| | | | |
| | | | □Add |
| | | | □Remove |
| | | | □ Change |

| | | | • | | | | - | - |
|------------------------------------|--|---|--|--------------------|----------------------|----------------|-------------|-------------------|
| | | | | | | | | - |
| - | | | <u>. </u> | | | | | - |
| | | _ | | | | | | - |
| | | <u>-</u> | | | | | _ | - |
| | | | | | | | _ | _ |
| | | | | | | | | _ |
| _ | | | | | | | <u> </u> | _ |
| | | | - | | | | - 1 3 | - <u>'</u> , : |
| | | | | | | 100 201 | 12: | _ ' '' |
| | | | | | | | 50 | _ |
| | | | | | | | | _ |
| lf an effecti <u>Note:</u> If t | date, if other that we date is listed, the date inserted in 's effective date or | late must be specific a this block does no | and cannot be pri t meet the appl | icable statutory t | or more than 90 days | | | |
| e record si | pecifies a delayed e | effective date, but r | not an effective | time, at 12:01 a. | m. on the earlier o | f: (b) The 90t | h day aft | er the |

Filing Fee: \$25.00

Carlos R. Rivera
Typed or printed name of signee

State of Florida Department of State

I certify from the records of this office that COPPER POINT BUILDERS LLC was a limited liability company organized under the laws of the State of Florida, filed on July 10, 2024.

The document number of this limited liability company is L24000307809.

I further certify that said limited liability company was voluntarily dissolved on August 26, 2024.

Given under my hand and the Great Seal of Florida, at Tallahassee, the Capital, this the Twenty Eighth day of August, 2024



Secretary of State

Authentication ID: 400435434754-082824-L24000307809

To authenticate this certificate, visit the following site, enter this ID, and then follow the instructions displayed.

https://efile.sunbiz.org/certauthver.html

COPPER POINT BUILDERS LLC

10550 NW 78th Street, 6-406, Miami, FL 33178

August 28, 2024

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

Re:

COPPER POINT BUILDERS LLC

Document Number: L24000307809

Dear Sir or Madam:

I, Carlos R. Rivera, AMBR of COPPER POINT BUILDERS LLC, being the sole member of the company, hereby release its name.

The purpose of this release is to utilize the name to change the name of another company I solely own by the name of ODILAC MIAMI, LLC.

Thanking you for your kind attention, I remain

Yours truly,

Carlos R. Rivera

AMBR

NOTARIZATION:

STATE OF FLORIDA COUNTY OF MIAMI-DADE

| The foregoing instrum Carlos A. Rivera | ent was acknowledged before me this 28 day of 400 day of 100 me or [| |
|--|--|---|
| | as identification. | • |
| Notary Signature: | - Surfetia | |
| Type or print Name: | Stephany R. Zakhia | |
| | | |

Notary Seal:

