## L 23000105510

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SECRETARY OF STATE

A. RIVERS JUN - 7 2023

## **COVER LETTER**

PEMOVE :	ANTONIO LCORREAL AS C	DEFICER OF CRIADERO 4 VIENT	rouc
SUBJECT:	ANTONIO J CORREAL AS C	nited Liability Company	
	Name of this	иси парику сопраку	
The enclosed Articles of a	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
		. AND ANTONIO J CORREAL	
		Name of Person	
	CRIADERO 4 VIENTO I.		
		Firm/Company	
	1397 NW 92ND TERR		
		Address	<del> </del>
	CORAL SPRINGS FL 336	071	
		City/State and Zip Code	
	ACP.CONSTRUCTION@		
	E-mail address; (	to be used for future annual report notif	ication)
For further information co	oncerning this matter, please c	all:	
ANTONIO J CORREAL		561 843-3332	
Name of	f Person	at () Area Code Daytime	e Telephone Number
Enclosed is a check for th	e following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed
Mailing Address	ç.	Street Address:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

▲ TO:

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

CRIADERO 4 VIENTOS LLC	
(Name of the Limited Liability Company as it now appears on our recor (A Florida Limited Liability Company)	<u>ds.</u> )
The Articles of Organization for this Limited Liability Company were filed on	and assigned
Florida document number L23000105510	
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	C" 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)	
	~~~
	023 SEC
3. If amending the registered agent and/or registered office address on our records, enter	r the name of the figw registe
gent and/or the new registered office address here:	88 2 <b></b>
	SER O
Name of New Registered Agent:	लंद के
New Registered Office Address:	8: STA:
Enter Florida street addre	<u> </u>
, F	lorida
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>	Name	Address	Type of Action
MGR	PEDRO LUIS CORREAL	4923 LOMBARD PASS DR LAKE WORTH, FL 33	
			□Remove
			□Change
MGR ANTONIO	ANTONIO J CORREAL		□Add
		1397 NW 92 ND TERR CORAL SPINGS FL 33071	=Remove
			ElChange
			□Add
		<del></del>	□Remove
			□Change
	<del></del>	<del></del>	[]Add
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Effective date, if other than the (If an effective date is listed, the date in Note: If the date inserted in this is document's effective date on the limit of th	iust be specific an block does not i	d cannot be prior meet the applic	to date of filing or able statutory fil	more than 90 days a requirements,	fter filing.) Pursuant to t	905.0207 (3) isted as the
ne record specifies a delayed effect ord is filed.	ive date, but no	t an effective ti	me, at 12:01 a.m	, on the earlier of	: (b) The 90th day a	fter the
Dated APRIL 10		. 2023	<u> </u>			
	DI	¥ .	C			

Filing Fee: \$25.00

Typed or printed name of signee