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	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-U	P	MAIL
 	(Business Entity Name)	
	(
	(Document Number)	
Certified Copies	Certificates of	Status
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COVER LETTER

Division of Co			<i>P</i>	*	
COFIMA	S PROPERTIES & REAL STA	TELLC			
SUBJECT: ***	Name of Lim	ited Liability Company	•		
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	NICOLAS HOJMAN				
		Name of Person			
		Firm/Company			
	5171 W OAKLAND PAR	K BLVD APT P211		2023 MAY	
		Address		HAY.	7
	LAUDERDALE LAKES,	FL 33313			
	ESALICRUP@FTAXGRO			PH 2:2	
For further information	t-mail address: (concerning this matter, please c	to be used for future annual report not all:	ification)	TIE 24	
NICOLAS HOJMAN		305 4974994 at ()			
Name	of Person		ne Telephone Ni	umber	
Enclosed is a check for	the following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Cer Cer	.00 Filing Fee, rtificate of Statu rtified Copy litional copy is encl	
Mailing Addre Registration Division of O P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Se Division of Co The Centre of 2415 N. Monro Tallahassee, Fl	rporations Tallahassee oe Street, Su	uite 810	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COFIMAS PROPERTIES & REAL STATE LLC	C		
(Name of the Limited Liability C (A Florida Lin	ompany as it now appears on o nited Liability Company)	ur records.)	
The Articles of Organization for this Limited Liability Com- Florida document number $\frac{1.23000119532}{1.23000119532}$.	pany were filed on 03/07/20	23	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liability company here:		
COFIMAS PROPERTIES & REAL ESTATE LLC			
The new name must be distinguishable and contain the words "Limited	Liability Company," the designat	tion "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES.	(S)	() ()	2023
			基 订
		<u>`</u>	1 1 ===
Enter new mailing address, if applicable:		·- , · ,	- :
(Mailing address MAY BE A POST OFFICE BOX)		73 73	- K. (1997)
		口克	2
		m	4-
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	fice address on our record	s, <u>enter the nam</u>	e of the new registe
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida str	eet address	
		, Florida	_
	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
			□Add
			□Remove
			□Change
			□∧dd
			□Remove
			2023 NAY — Chapre
			ra → □Add
			Fig. 72. □Remove
	····•		□Add
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yped or printed name of signee