

L23000231685

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

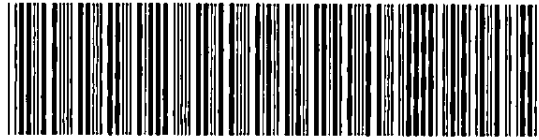
(Document Number)

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type of action
you are taking w/
each am br.

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05/30/24--01014--004 **25.00

2024 JUL 16 PM 5:04
SECRETARY OF STATE
TALLAHASSEE, FL

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me

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Address Change- Astra 37 Units LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Johnathan Ibarra-Blackmoon

Name of Person

Astra Property Group

Firm/Company

152 NE 167th St, Suite 405

Address

Miami FL 33162

City/State and Zip Code

info@astrapg.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Johnathan Ibarra-Blackmoon

954 372-1043
at ()

Name of Person

Area Code

Daytime Telephone Number

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)

☐ \$60.00 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

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TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 11, 2024

JOHNATHAN IBARRA-BLACKMOON
152 NE 167TH ST, SUITE 405
MIAMI, FL 33162

SUBJECT: ASTRA 37 UNITS LLC
Ref. Number: L23000231685

We have received your document for ASTRA 37 UNITS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the type of action you are taking with each member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Morgan E Lovett
Regulatory Specialist II

Letter Number: 524A00012665

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TALLAHASSEE FL

7/1/24

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Astra 37 Units 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 05/10/2023 and assigned
Florida document number L23000231685.

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 "L.L.C."

Enter new principal offices address, if applicable:

152 NE 167th St, Suite 405

(Principal office address MUST BE A STREET ADDRESS)

Miami FL 33162

Enter new mailing address, if applicable:

152 NE 167th St, Suite 405

(Mailing address MAY BE A POST OFFICE BOX)

Miami FL 33162

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:

152 NE 167th St, Suite 405

Enter Florida street address

Miami

Florida

33162

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>	<u>Address</u>	<u>Type of Action</u>
MGRM	Farpel FL LLC		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		152 NE 167th Ste 405 Miami FL 33162	<input checked="" type="checkbox"/> Change
AMBR	KRI974 INC	45 Harasses Blvd	<input type="checkbox"/> Add
		Modi'm Maccabim Re'ut, IL 71795-55 IL	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Thetidos LTD	39 Pines St	<input type="checkbox"/> Add
		Tel Aviv-Yafo, IL 66847-03 IL	<input type="checkbox"/> Remove
		152 NE 167th Ste 405 Miami FL	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2006 JUL 16 PM 5:04
SECRETARY OF STATE
FL
TELEPHONY

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2024 JUL 16 PM 5:02
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TALLAHASSEE
FBI

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be filed as the document's effective date on the Department of State's records.

Dated 05/14, 2024

Yellow-brown - Horizon - Blackmore

Filing Fee: \$25.00