

L23000258556

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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08/14/23--01010--004 **25.00

2023 AUG 14 AM 10:31

A. PARISHANI

08 19 2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tempo Casual Homes LLC
Name of Limited Liability Company

2023 AUG 14 AM 10:31

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

Please return all correspondence concerning this matter to the following:

Cesar Miranda Cardenas
Name of Person

Firm/Company

1993 SE Cheltenham St
Address

Port Saint Lucie, FL, 34983
City/State and Zip Code

Cesar.mirandac16@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cesar Miranda Cardenas
Name of Person

at (772) 709-0814
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

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

Tempo Casual Homes LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

2023 AUG 14 AM 10:31

The Articles of Organization for this Limited Liability Company were filed on 08-07-23 and assigned
Florida document number L23000258556

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:

(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:

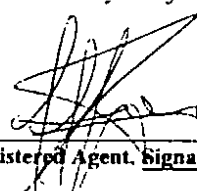
New Registered Office Address:

Enter Florida street address

_____, **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>	<u>Address</u>	<u>Type of Action</u>
MGR	Cesar Miranda Cardenas	1993 SE Cheltenham St	☒ Add
			☐ Remove
			☐ Change
	Tempo Casual	1993 SE Cheltenham St	☐ Add
			☒ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
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			☐ Change

2023 JUN 14 AM 10:31

2023 AUG 14 AM 10:51

2023 AUG 14 AM 10:31

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

If the record 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 record is filed.

Dated 08-07-23

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00