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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: VALERIA	PEREZ GROUP BRICK	ELL BUILDING LLC	
30B3EC1.	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	emitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	ALDO A HASBUN		
		Name of Person	
	ALDO A HASBUN PA	1	
		Firn√Company	
	6970 BIRD RD 228		
		Address	
	MIAMI FLORIDA 331	55	
		City/State and Zip Code	
	ALDOAHS6@HOTMA		
	E-mail address: (to be used for future annual report not	ification)
For further information c	oncerning this matter, please c	all:	
LAURA PATINO		at (786) 843-6760	0
Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne 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 Addres Registration S		<u>Street Address:</u> Registration Se	ection
Division of C		Division of Co	
P.O. Box 632	.7	The Centre of	Tallahassee
Tallahassee, l	FL 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VALERIA PEREZ GROUP BRICKELL BUILDING LLC

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

	(A Florida Limited Lial	bility Company)	
The Articles of Organization for this Limited L Florida document number <u>L23000278060</u>	Liability Company wo	ere filed on 06/08/2023	and assigned
This amendment is submitted to amend the following	lowing:		
A. If amending name, enter the new name of	of the limited liabilit	v company here:	
The new name must be distinguishable and contain the	words "Limited Liability	Company," the designation "L	.LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applie	cable:		24
(Principal office address MUST BE A STREET ADDRESS)			
	-		
Enter new mailing address, if applicable:	_		
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>
B. If amending the registered agent and/or agent and/or the new registered office addre	ess here:		er the name of the new registered
Name of New Registered Agent:	ALDO A HAS	BUN PA	
New Registered Office Address:	6970 BIRD RD		
•		Enter Florida street add	lress
	MIAMI	,	Florida 33155 Zip Code
		City	Zip Code
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as registered provisions of all statutes relative to the propaccept the obligations of my position as registering filed to merely reflect a change in the company has been notified in writing of this	per and complete pe istered agent as pro registered office ac	erformance of my duties, wided for in Chapter 60 ldress, I hereby confirm	and I am familiar with and 5, F.S. Or, if this document is

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
<u>VP</u>	VALERIA ANDREA PEREZ CASTRO		□Add
		14828 SW 265 ST HOMESTEAD FL 33032	
			🖸 Change
<u>P</u>	NELSON JAVIER PEREZ HERNANDEZ		□Add
		14828 SW 265 ST HOMESTEAD FL 33032	? ☑Remove
			□Change
MGR	NELSON JAVIER PEREZ HERNANDEZ	14828 SW 265 ST HOMESTEAD FL 3303	32 _ ⊠Add
			□Remove
			□Change
			□Add
			🗆 Remove
			□Change
			□Add
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			□Add
			Remove
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E. Effective date, if other than the date of filing: (optional)	
E. Effective date, if other than the date of filing:	
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 afterecord is filed.	er the
Dated racing 07 . 2024 . Melson J. Fews Signature of a member or authorized representative of a member	
nelson 1. Periz	
Signature of a member or authorized representative of a member	

Typed or printed name of signee