

L23000461677

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

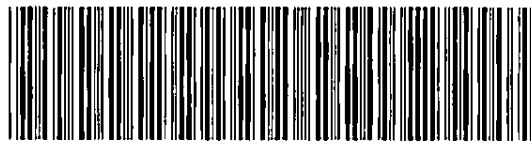
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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A. RIVERS

2022

Marlene Leon-Rubido

Attorney At Law

850 NW 42 Avenue
Office Building, Suite 205
Miami, Florida 33126
email: marlenerubido@rubidolaw.com

Tel: (305) 596-2211
Tel: (305) 446-2517
Fax: (305) 446-7521

October 25, 2023

Division of Corporation
Florida Department of State
P.O. Box 6327
Tallahassee, Florida 32314

RE: Caste Heights LLC
Amendment to Articles of Organization


Dear Sir or Madam:

As per your instructions, enclosed are:

1. Articles of Amendment.
2. Check in the sum of \$25.00, representing your fee for the filing.

Thank you for your courtesies and please do not hesitate to contact me if you have any questions.

Sincerely,


Marlene Leon-Rubido, Esquire

Enclosures

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

CASTLE HEIGHTS, 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 10/6/2023 and assigned Florida document number 1.23000461677.

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	MARIO CASTELLANOS	14850 SW 26 Street, Suite 210	<input checked="" type="checkbox"/> Add
		Miami, Florida 33185	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	IBONNE CASTELLANOS	14850 SW 26 Street, Suite 210	<input checked="" type="checkbox"/> Add
		Miami, Florida 33185	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

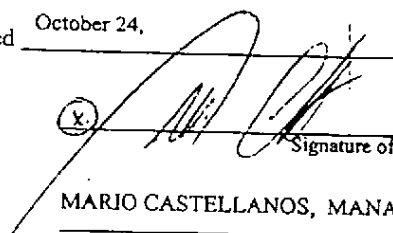
E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
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 October 24, 2023

☒


Signature of a member or authorized representative of a member

MARIO CASTELLANOS, MANAGER

Typed or printed name of signer

Filing Fee: \$25.00