

10/16/24, 5:19 PM

Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

L23000559018

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : E & F LATIN GROUP LLC

Account Number : 120160000049

Phone : (954)384-8565

Fax Number : (954)385-5175

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TALLAHASSEE, FL

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: support@eflatinaccounting.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

50 BISCAYNE 2401 LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

M. SOLOMON

OCT 17 2024

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

50 BISCAYNE 2401 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 12/20/2023 and assigned
Florida document number L23000559018.

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)

9300 FONTAINEBLEAU BLVD, APT 103
MIAMI FL 33172

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

9300 FONTAINEBLEAU BLVD, APT 103
MIAMI FL 33172

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:

E&F LATIN GROUP LLC

New Registered Office Address:

1820 N CORPORATE LAKE BLVD SUITE 109

Enter Florida street address

WESTON

City

Florida 33326

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.


Diego Figueroa
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>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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TALLAHASSEE, FL

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CLERK OF DISTRICT COURT
TAMPA, FLORIDA

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Dated October 16, 2024

Diego Figueroa

Signature of a member or authorized representative of a member

DIEGO FIGUEROA

Typed or printed name of signer

Filing Fee: \$25.00