

L24000065793

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

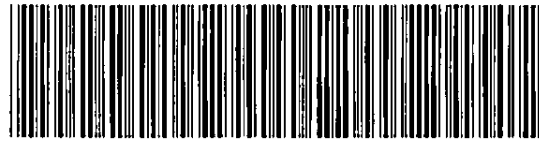
(Document Number)

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04/17/24--01029--005 **30.00

STATE
TOLSON, MISSISSIPPI, FL

2024 MAY 28 PM 2:45

FILED

APB

COVER LETTER

TO: Registration Section
Division of Corporations

VAHERA REALTY LLC

SUBJECT: _____
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:

Jorge Osorio

Name of Person

Consolidate Financial Service LLC

Firm/Company

7500 NW 25TH ST SUITE 237

Address

DORAL, FL 33122

City/State and Zip Code

jorgeosorio@consolidatedfs.net

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

For further information concerning this matter, please call:

Jorge Osorio

786

419-8098

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

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

VAHERA REALTY LLC

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

FILED

The Articles of Organization for this Limited Liability Company were filed on 02/05/2024 and assigned
Florida document number L24000065793

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)

7500 NW 25TH ST SUITE 237, DORAL FL-33122

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

7500 NW 25TH ST SUITE 237, DORAL FL-33122

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:

CONSOLIDATE FINANCIAL SERVICE LLC

New Registered Office Address:

7500 NW 25TH ST SUITE 237

Enter Florida street address

DORAL

City

Florida

33122

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

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[illegible]

(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)

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.

James Deane

Typed or printed name of signee



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 30, 2024

JORGE OSORIO
7500 NW 25TH ST
SUITE 237
DORAL, FL 33122

SUBJECT: VAHERA REALTY LLC
Ref. Number: L24000065793

We have received your document for VAHERA REALTY LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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.

Anissa Butler
Regulatory Specialist II

Letter Number: 224A00009307

