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COVER LETTER

TO: Registration So Division of Co			
SUBJECT: VALERIA	PEREZ DEVELOPMENT	3701 LLC	
		d Liability Company	
The enclosed Articles of	Amendment and fee(s) are subm	itted for filing.	
Please return all correspo	ondence concerning this matter to	the following:	
	ALDO A HASBUN		
		Name of Person	
	ALDO A HASBUN PA		
		Firm/Company	
	6970 BIRD RD 228		
		Address	
	MIAMI FLORIDA 33155	i i	
		City/State and Zip Code	
	ALDOAHS6@HOTMAIL		
		be used for future annual report notif	fication)
For further information c	oncerning this matter, please call	:	
LAURA PATINO		_{at (} 786 ₎ 843-6760	
Name o	f Person		e Telephone Number
Enclosed is a check for th	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 Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address:
Registration Section
Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VALERIA PEREZ DEVELOPMENT 3701 LLC

company has been notified in writing of this change.

(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 02/22/2024 and assigned Florida document number <u>L24000</u>093770 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: ALDO A HASBUN PA Name of New Registered Agent: 6970 BIRD RD New Registered Office Address: Enter Florida street address MIAMI City 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

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	_ ☑Remove
<u>P</u>	NELSON JAVIER PEREZ HERNANDEZ		□Add
		14828 SW 265 ST HOMESTEAD FL 33032	2
		<u>.</u>	□Change
MGR	NELSON JAVIER PEREZ HERNANDEZ	14828 SW 265 ST HOMESTEAD FL 3303	62 _ ☑Add
			□Remove
			□Change
			□Add
			_ □Remove
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active date	, if other than t	the date of fi	ling				(optio	anal)	
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		Signature o	of a membe	r or authoriz	ed represent	ative of a me	mber		