

L24000318986

(V01)

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

☐

WAIT

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MAIL

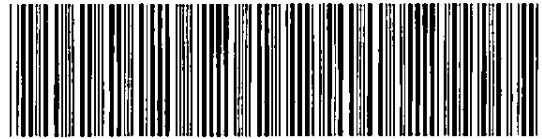
(Business Entity Name)

(Document Number)

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10/01/24--01001--005 **25.00

2024 OCT -1 PM 5:18
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CRUISEPORT DESTINATIONS SECURITY LLC
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:

CARLOS A. MACCHI

Name of Person

WEALTH PROJECTS

Firm/Company

10689 NORTH KENDALL DRIVE SUITE 321

Address

MIAMI, FL 33176-1525

City/State and Zip Code

macchiins@bellsouth.net

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

For further information concerning this matter, please call:

CARLOS A MACCHI

305 967-0471
at ()
Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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

PLEASE INCLUDE WITH THE INFORMATION THE EIN: 99-4027306
MIAMI DADE COUNTY. MIAMI INTERNATIONAL AIRPORT REQUEST
SHOWING THIS INFO AT sunbiz.org PAGE AND DOCUMENTS SUBMITTED.

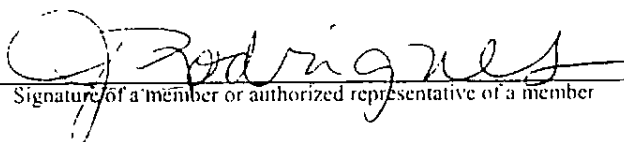
E. Effective date, if other than the date of filing: _____ (optional)

(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 SEPTEMBER 18, 2024


Signature of a member or authorized representative of a member

JEANNETTE RODRIGUES, MANAGER MEMBER

Typed or printed name of signer

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

CRUISEPORT DESTINATIONS SECURITY 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 07/18/2024 and assigned
Florida document number L24000318986.

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

City

, Florida

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	JORGE ROIG	1900 NORTH BAYSHORE DRIVE APT 4901	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33132-3026	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	EDWARD J. CUNEO	601 SW 2nd STREET	<input checked="" type="checkbox"/> Add
		BOCA RATON, FL 33486-4603	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change



EIN Assistant

1. Select a business type

2. Select a business type

3. Select a business type

4. Select a business type

5. Select a business type

5. EIN Confirmation

Congratulations! Your EIN has been successfully assigned.

EIN Assigned 99-4027306

Legal Name CRUISEPORT DESTINATIONS SECURITY LLC

Your confirmation letter will be mailed to you. This letter will be your official IRS notice and will contain important information regarding your EIN. Allow up to 4 weeks for your letter to arrive by mail.

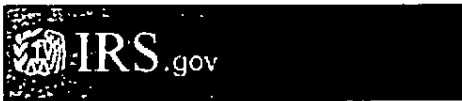
We strongly recommend you print this page for your records.

Click "Continue" to get additional information about using your new EIN.

[Continue >>](#)

Help Topics

[Can the EIN be used before the confirmation letter is received?](#)



EIN Assistant

1. Select Organization Type 2. Identify 3. Additional Information 4. Address and Contact Information 5. EIN Confirmation

Summary of your information

Please review the information you are about to submit. If any of the information below is incorrect, you will need to [start a new application](#).

Click the "Submit" button at the bottom of the page to receive your EIN.

Organization Type: LLC

LLC Information

Legal name:	CRUISEPORT DESTINATIONS SECURITY LLC
County:	MIAMI-DADE
State/Territory:	FL
Start date:	JULY 2024
State/Territory where articles of organization are (or will be) filed:	FL

Addresses

Physical Location:	4627 PONCE DE LEON BLVD CORAL GABLES FL 33146
Phone Number:	305-491-4363

Responsible Party

Name:	JEANNETTE M RODRIGUES SOLE MBR
SSN/ITIN:	XXX-XX-3869

Principal Business Activity

What your business/organization does:	OTHER
Principal products/services:	SECURITY SERVICES

Additional LLC Information

Owens a 55,000 pounds or greater highway motor vehicle:	NO
Involves gambling/wagering:	NO
Involves alcohol, tobacco or firearms:	NO
Files Form 720 (Quarterly Federal Excise Tax Return):	NO
Has employees who receive Forms W-2:	NO
Reason for Applying:	STARTED A NEW BUSINESS

We strongly recommend you print this summary page for your records as this will be your only copy of the application. You will not be able to return to this page after you click the "Submit" button.

Click "Submit" to send your request and receive your EIN.

Submit

Once you submit, please wait while your application is being processed. It can take up to two minutes for your application to be processed.