124000328857

(Red	questor's Name)	
(Add	dress)	
(Ado	dress)	
(City	//State/Zip/Phone	e #)
☐ SICK-NB	WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Dad	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	
1)	Mills)

Office Use Only



200434626372

08/12/24--01023--026 **25.00



COVER LETTER

SUBJECT:	Name of Lim	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Jorge Garcia-Menocal, Esc	4.	
		Name of Person	
	Garcia-Menocal Irias & Pa	istori LLP	
	·	Firm/Company	*
	368 Minorca Ave		
		Address	
	Coral Gables, FL 333134		
		City/State and Zip Code	
	processor@gmilaw.com		
		to be used for future annual report noti	fication)
For further information c	concerning this matter, please c	all:	
Jorge Garcia-Menocal, F	isq.	305 400-9652 at ()	
Name c	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	he 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

TO: Registration Section

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

7711 S	w 21 StLLC.	
(Name of the Limited Liability (A Florida L	Company as it now appears on our records.) imited Liability Company)	
The Articles of Organization for this Limited Liability Cor Florida document number <u>L24000328857</u>	mpany were filed on <u>07-24-2024</u>	and assigned
This amendment is submitted to amend the following:	- '	
A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	ed 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 ADDRE	<u></u>	<i>ج</i> -2
		2
Enter new mailing address, if applicable:		; -2
(Mailing address MAY BE A POST OFFICE BOX)		• • •
		<u>ා</u> ස්
B. If amending the registered agent and/or registered of	office address on our records, <u>enter the</u>	name of the new registered
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Emer Florida street address	
	Florid	
 -	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>	Address	Type of Action
MGR	GIL HERNANDEZ, LAZARO M	7731 SW 21 STREET, MIAMI, FL 33155	≣ Add
			□Remove
			□Change
			🗀 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
		-	□Remove
			□Change
			🗀 Remove
			□Change
			🗆 Add
			□Remove
			□Change

		_			
			· · · · · · · · · · · · · · · · · · ·		
					·
•					
					
				. 75.2	
fective date, if othe	er than the date of f	iling:		(ontional)
n effective date is listed	er than the date of fi the date must be specific	e and cannot be prior	to date of filing or mor	e than 90 days after filing	g.) Pursuant to 605.0207
o <u>te:</u> 11 the date insert cument's effective da	ed in this block does nate on the Department	of meet the application of State's records.	ible statutory filing	requirements, this dat	e will not be listed as
	·				
ecord specifies a dela	yed effective date, but	not an effective tir	ne, at 12:01 a.m. on	the earlier of: (b) T	he 90th day after the
is filed.	•				•
1111 Y 2 I		2024			
ted		2024	_ ·		
		11			
		X La	(M)		
	Signature o	of a member or autho	rized representative o	f a member	
	Signature (of a member or autho	rized representative o	f a member	