

M1300000 2850

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

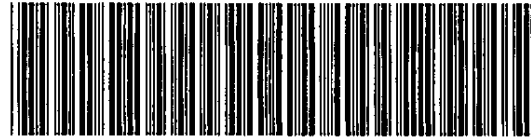
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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05/03/18--01011--020 **25.00

FILED
2018 MAY 11 PM 1:35
CLERK OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Royal Palm Companies, LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Oscar Ospina
Name of Person

Paramount Residences
Firm/Company

1010 NE 2nd Avenue
Address

Miami, FL 33132
City/State and Zip Code

Oscar@Paramountresidences.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Oscar Ospina at (786) 363-9050
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- ☒ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 7, 2018

ROYAL PALM COMPANIES, LLC
1010 NE 2ND AVE
MIAMI, FL 33132

SUBJECT: ROYAL PALM COMPANIES, LLC
Ref. Number: M13000002850

We have received your document for ROYAL PALM COMPANIES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida LLC, but your entity is a Foreign LLC. Please complete and return the enclosed blank form(s).

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) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 518A00009375

RECEIVED

2018 MAY 11 AM 11:16

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
2018 MAY 11 PM 1:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: Royal Palm Companies, LLC

Enter new principal office address, if applicable: 1010 NE 2nd Avenue

(Principal office address
MUST BE A STREET ADDRESS) Miami, FL 33132

Enter new mailing address, if applicable:

(Mailing address
MAY BE A POST OFFICE BOX) 1010 NE 2nd Avenue
Miami, FL 33132

2. The Florida document number of this limited liability company is: M 13000002850

3. Jurisdiction of its organization: South Dakota

4. Date authorized to do business in Florida: 05/03/2013

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: _____
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer 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: Sergio Moises

New Registered Office Address: 1010 NE 2nd Avenue
Enter Florida Street Address

Miami, Florida 33132
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.

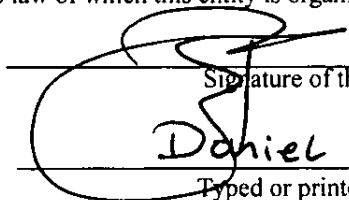
If Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>Jonatha Gopman</u>	<u>9128 Strada Place</u>	<input type="checkbox"/> Add
		<u># 10206</u>	
		<u>Naple, FL 34108</u>	<input checked="" type="checkbox"/> Remove
<u>MWG</u>	<u>Daniel Kodosi</u>	<u>1010 NE 2nd Avenue</u>	<input checked="" type="checkbox"/> Add
		<u>Miami, FL 33132</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the
aforementioned amendment(s), duly authenticated by the official having custody of records in the
jurisdiction under the law of which this entity is organized.



Signature of the authorized representative
Daniel Kodosi

Typed or printed name of signee

Filing Fee: \$25.00

FILED
MAY 11 PM 1:36
SECRETARY OF STATE
TALLAHASSEE FLORIDA