

M23000004239

(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:

23 - Incorporation
Limited Liability
Rec. November 18,
2024

Office Use Only



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2024/11/18 PM 1:52

112

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ADVANTIS MCA HYATT, 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:

ALEJANDRO VELEZ
Name of Person

ADVANTIS MCA HYATT, LLC
Firm/Company

135 SW 7th STREET, SUITE 2112
Address

MIAMI, FL 33130
City/State and Zip Code

AVELEZ@MIDTOWN-CAPITAL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ALEJANDRO VELEZ at (305) 505-4945
Name of Person Area Code & Daytime Telephone Number

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

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

**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)

2023 JUN 13 PM 1:52

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

State: ADVANTIS MCA HYATT, LLC

Enter new principal office address, if applicable: 175 SW 7th STREET, SUITE 2112

(Principal office address

MUST BE A STREET ADDRESS)

MIAMI, FL 33130

Enter new mailing address, if applicable:

(Mailing address

MAY BE A POST OFFICE BOX)

175 SW 7th STREET, SUITE 2112

MIAMI, FL 33130

2. The Florida document number of this limited liability company is: M23000004239

3. Jurisdiction of its organization: DELAWARE

4. Date authorized to do business in Florida: 04/03/2023

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: DADE REGISTERED AGENT INC

New Registered Office Address: 175 SW 7th STREET, SUITE 2112

Enter Florida Street Address

MIAMI
City

Florida 33130
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

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

M6R	ZAHN, RICHARD G, SR.	1991 INDUSTRIAL DRIVE	<input type="checkbox"/> Add
		DELAND, FL 32724	<input checked="" type="checkbox"/> Remove
M6R	PREG- ADVANTIS, LLC	1991 INDUSTRIAL DRIVE	<input type="checkbox"/> Add
		DELAND, FL 32724	<input checked="" type="checkbox"/> Remove
M6R	MCA MDF, LLC	175 SW 7 th STREET, SUITE 2112	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33130	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

Signature of the authorized representative

ALEJANDRO VELEZ

Typed or printed name of signee

Filing Fee: \$25.00

Alejandro Velez
MGR
Re: Advantis MCA Lauderhill LLC/Advantis MCA Flagler Triangle LLC/Advantis MCA Hyatt
LLC

175 SW 7th Street, Suite 2112
Miami, FL 33130
avelez@midtown-capital.com
(305)505-4945

October 30, 2024

Department of State
Division of Corporations
P.O.Box 6327
Tallahassee, FL 32314

Dear Sir/Madam,

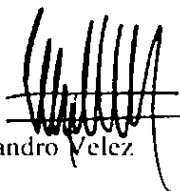
We are writing regarding the amendment process for the following entities: Advantis MCA Lauderhill, LLC, and Advantis MCA Flagler Triangle, LLC. We recently received a notification to change their status from *Florida LLC* to *Foreign LLC*. However, we did not receive a similar amendment request for Advantis MCA Hyatt, LLC, which should undergo the same change.

For your convenience, we are attaching the correct amendment forms for Advantis MCA Hyatt, LLC, as its situation mirrors that of the other two companies mentioned.

We appreciate your attention to this matter and your assistance in processing the amendments for all three companies.

Thank you for your support.

Sincerely,



Alejandro Velez

MGR



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 16, 2024

ALEJANDRO VELEZ
175 SW 7 STREET
SUITE 2112
MIAMI, FL 33130

SUBJECT: ADVANTIS MCA HYATT, LLC
Ref. Number: M23000004239

We have received your document for ADVANTIS MCA HYATT, 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 form you submitted is for a FLORIDA LIMITED LIABILITY COMPANY, but your entity is a FOREIGN LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

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: 624A00022867