# L13000177180

(Requestor's Name)		
	·	
(Ad	ldress)	
(Address)		
(Cit	ty/State/Zip/Phone	e #)
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PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	

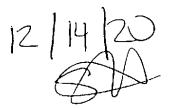




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FILED 2020 NOV -5 AM 11: 36



## DocuSign Envelope ID: 3837D717-CC43-46A3-AA65-EA050715CCD1 COVER LETTER

	stration Section			
Divis	sion of Corpor	•	هو منها الله الله الله	•
	ţ.	. <b>*</b>	7 9.	• •
SUBJECT: _	۳	LUCENA LLC		
		Name of Lin	nited Liability Company	
The enclosed	Artialse of Am	endment and fee(s) are sub	amitted for filing	
The chelosed	Aracies of Alli	enoment and rec(s) are sut	mitted for fitting.	
Please return a	all corresponde	nce concerning this matter	to the following:	
		F	Ricardo Resino	
			Name of Person	
			Firm/Company	
		800	04 NW 154 Street #117	- <del></del> -
			Address	
		Miami La	akes, FL 33016	
	,		City/State and Zip Code	
	_	ricusar@gmail.co	om	
		E-mail address: (	to be used for future annual report not	ification)
For further info	ormation conce	erning this matter, please c	all:	
	Ricardo Res			0597
	Name of Per	son	Area Code Daytin	ne Telephone Number
Enclosed is a c	heck for the fo	Howing amount:		
<b>∑</b> \$25.00 Fil	ing Fee [	330.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy	☐ \$60.00 Filing Fee, Certificate of Status &
		Service of Status	(additional copy is enclosed)	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

### DocuSign Envelope ID: 3837D717-CC43-46A3-AA65-EA050715CCD1 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

LUCENA LLC			
(Name of the Limited Liability (A Florida	y Company as it now appea Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Co	ompany were filed on	12/27/2013	and assigned
	<b>_</b> •		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ted liability company h	ere:	
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the c	lesignation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:			<u></u>
(Principal office address MUST BE A STREET ADDR	<u>ESS)</u>		DO FO
			27
			· · · · ·
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		<u>-</u>	1:36
			· ~
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our r	ecords, <u>enter the na</u>	me of the new registe
agent analyst the new registered office address figre.			
Name of New Registered Agent:			
New Registered Office Address:	Enter Flo.	rida street address	. <u></u>
<del></del>	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.

DocuSign Envelope ID: 3837D717-CC43-46A3-AA65-EA050715CCD1
II amenuing Authorized rerson(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>MGR</u>	RICARDO RESINO	8004 NW 154 STREET #117	□Add
		MIAMI LAKES, FL 33016	X Remove
			Change
AMBR	RICARDO RESINO	8004 NW 154 STREET #117	<b>X</b> ]Add
		MIAMI LAKES, FL 33016	□Remove
			Remove  Change  Add  Remove
			Remove
			□Change
			□ Add
			□Remove
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			[]Chanua

If amending any other information, enter change(s) here:	(much dualitomic sheets, y necessary,)
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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to  Sote: If the date inserted in this block does not meet the applicable ocument's effective date on the Department of State's records.	date of filing or more than 90 days after filing.) Pursuant to 605.0207
record specifies a delayed effective date, but not an effective time is filed.	e, at 12:01 a.m. on the earlier of; (b) The 90th day after the
eated NOVEMBER 2 2020	_·
Signature of a member or authorize	zed representative of a member
	ada DECTNO
Ricar Typed or printed i	do RESINO