## 140000 74821

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	s #fi
(Oil	y/Glate/Zip/i Holle	· ")
PICK-UP	☐ WAIT	MAIL
(Bri	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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09/24/19 - 610:0~-013 - \*\*25.00



## **COVER LETTER**

echirze.	BASICO STUDIOS I	I.C	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
		JÖRGE ALZATE	
	<del></del>	Name of Person	
	1	BASICO STUDIOS LLC	
	10	00 SW 10TH ST SUIT 715	
		Address	
		MIAMI, FL 33130	
		City/State and Zip Code	
		lzatejmario@gmail.com	
	E-mail address: (	to be used for future annual report not	fication)
For further informatio	n concerning this matter, please ca	ıll:	
JORG	E ALZATE	786 351-7263	
Nan	e of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check fe	r the 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 Tallahassee, FL 32314

TO:

Registration Section Division of Corporations

STREET/COURIER ADDRESS:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

pears on our records.) ny)			
MAY 07/2014	a	nd assig	gned
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the designation "LLC" or the	abbreviat	ion "1I.	.C."
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on our records, <u>ent</u>	er the r	. <b>E-</b> 18 <b>816</b> 0	f the
Florida street address			
, Florida		Code	
	y here: the designation "LLC" or the on our records, ente	MAY 07/2014 a  y here:  the designation "LLC" or the abbreviate	where:  the designation "LLC" or the abbreviation "L.L.  28 9 SEP 24  24 Properties on our records, enter the master of the properties of the street address.

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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MBR	BALCAZAR, CESAR	1800 N BAYSHORE DR #2201 MIAMI, FL 33132	Add
			■ Remove
			Change
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			☐ Change
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			□ Change

D. If amen	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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	08/28/2019
(If an eff Note:	ve date, if other than the date of filing:
If the red (b) The	tord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	08/28/2019 Signature of a member or authorized representative of a member
	111-
	Signature of a member or authorized representative of a member
	JORGE ALZATE
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00