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	tegistration Se Division of Cor			
SUBJECTS	DON EMIL	LIO ELLC		
SCIDIC.	·	Name of Lim	ited Liability Company	
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please rett	irn all correspo	ndence concerning this matter	to the following:	
		GRACIELA DEL VAL		
		DON EMILIO LLC	Name of Person	
		12520 SW 15TH MANOR	Firm Company	
		DAVIE, FL 33325	Address	
		mp.gamservices/@gmail.com		
		E-mail address: (to be used for future annual report noti-	fication)
For further	information c	oncerning this matter, please co	all:	
Graciela D			954 826-7252 at () Area Code Daytime	
	Name o	f Person	Area Code Daytim	2 Telephone Number
Enclosed is	s a check for th	ne following amount:		
S \$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 tadditional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314 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

(Name of the Limited Liability Co (A Florida Lum	mpany as it now appears on our records.) ied Liability Company)		
The Articles of Organization for this Limited Liability Comparison document number $\frac{L15000022395}{L15000022395}$	any were filed on $\frac{02/05,2015}{}$		
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the limited l</u>	liability company here:		
he new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" or t	he abbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRESS	<u> </u>		
		201	
		2019	
Inter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)		- ب	
		الانتسيس ي المنطقة الانتسيس ي	
		2: 2	
3. If amending the registered agent and/or registered egistered agent and/or the new registered office address in the new registered office address in the new registered office address in the new registered of the new re	d office address on our records, <u>er</u> <u>here</u> :	iter the name of the i	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	Florid:	at	
	City	Zin Code	

New Registered Agent's Signature, if changing Registered Agent:

DON EMILIOTLIC

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>	<u>Address</u>	Type of Action
MGR	LA PETRONILA LLC	8 THE GREEN SUITE A DOVER, DE 19901	🗖 Add
			■ Remove
			□ Change
MGR	DEL VAL, GRACIELA	12520 SW 15TH MANOR DAVIE, FL 33325	■ Add
			Remove
			Change
MGR	DEL VAL, IMANOL	12520 SW 15TH MANOR DAVIE, FL 33325	Add
			☐ Remove
			☐ Change
			
			☐ Remove
			□ Change
			
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ffective date, i	other than the date of filing listed, the date must be specific and	g:	of filing or more than 90	(optional) days after filing.) Pursuai	น เอ 605
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e record spec The 90th da	fies a delayed effective of after the record is filed.	iate, but not an e	errective time, at	12:01 a.m. on the	earne
ated MAY 22		2019	1		
		Villa III	!		
	Mark		,		
	Signature of a	member or authorized re	epre/entative of a memb	er	
	1		1		
GRAG	IELA DEL VAL		i		

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Filing Fee: \$25.00