## K180000 11550

(Requ	uestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Docu	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	

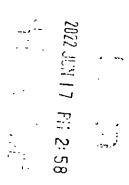
Office Use Only

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## COVER LETTER

TO:

Registration Section

**Division of Corporations** RAUL BRAVO SERVICES LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: MARIUSKA BRITO Name of Person BRITO TAX AND ACCOUNTING CORP Firm/Company 1695 NW 110TH AVE Address DORAL, FL 33172 City/State and Zip Code BRITOTAXCORP@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MARIUSKA BRITO Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ■ \$25,00 Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed) Street Address: Mailing Address: Registration Section Registration Section **Division of Corporations Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



RECEIVED

2022 JUN 17 AM 8: 07

SEC. FELLANA SEC. FELL

May 18, 2022

MARIUSKA BRITO 1695 NW 110TH AVENUE UNIT 214 MIAMI, FL 33172

SUBJECT: RAUL BRAVO SERVICES LLC

Ref. Number: L18000011550

We have received your document for RAUL BRAVO SERVICES LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

The document number of the name conflict is L21000462789.

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.

Claretha Golden Regulatory Specialist II

Letter Number: 822A00011346



RECEIVED

2022 MAY -9 AM 11: 10

SECRET. J.ATE TALLAHAGGEE, FL

April 9, 2022

BRITO TAX & ACCOUNTING CORP 1695 NW 110TH AVENUE UNIT 312 MIAMI, FL 33172

SUBJECT: RAUL BRAVO SERVICES LLC

Ref. Number: L18000011550

We have received your document for RAUL BRAVO SERVICES LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

The form you submitted is for a Profit corporation, but your entity is a Limited Liability company. Please complete and return the enclosed blank form(s).

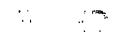
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 622A00008273

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



RAUL BRAVO SERVICES LLC			2022 JUN 17 PM 2:58
(Name of the Limited (A	<b>Liability Compan</b> Florida Limited Li	y as it now appears on our reco ability Company)	ords.)
The Articles of Organization for this Limited Liabi	ility Company v	vere filed on 01/12/2018	and assigned
This amendment is submitted to amend the followi	ing:		
A. If amending name, enter the new name of th	<u>e limited liabil</u>	ity company here:	
BRAVO SMART SERVICES LLC			
The new name must be distinguishable and contain the word	ls "Limited Liabilit	y Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicabl Principal office address MUST BE A STREET A		N/A	
Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BO	<u>)X)</u>	N/A	
B. If amending the registered agent and/or regi agent and/or the new registered office address h		ldress on our records, <u>ent</u>	er the name of the new registered
Name of New Registered Agent:	N/A		<del></del>
New Registered Office Address:	<del></del>	Enter Florida street add	ress
-	<u> </u>	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.

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>	<u>Name</u>	Address	Type of Action
		N/A	□Add
			□Remove
			□Change
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			□Remove
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rective date, if other than the date of filing:	N/A		
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Signative for a member or authorized representative of a member  [optional]  [			
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