

L20000 285420

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

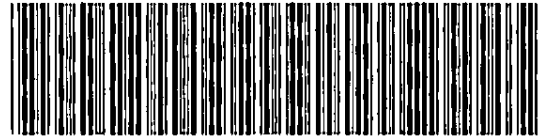
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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NOV 05 2020

S. YOUNG

NOV 05 2020 11:54

# COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: BEST SALE USA LLC  
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:

CRISTIAN D FLORES  
Name of Person

BEST SALE USA LLC  
Firm/Company

2350 SW 27<sup>th</sup> Ave Apt 505  
Address

MIAMI, FL. 33145  
City/State and Zip Code

cdflorespozo@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CRISTIAN D FLORES at (305) 710 1992  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for 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

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

BEST SALE USA LLC  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

2020 09 11:54

The Articles of Organization for this Limited Liability Company were filed on 8:00 am Sep 11, 2020 and assigned Florida document number L20000285420.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

BEST SALE USA LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2350 SW 27th Ave Apt 505  
MIAMI, FL. 33145

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2350 SW 27th Ave Apt 505  
MIAMI, FL. 33145

B. If amending the registered agent and/or registered office 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:

CRISTIAN D FLORES

New Registered Office Address:

2350 SW 27th Ave Apt 505

*Enter Florida street address*

MIAMI

*City*

Florida

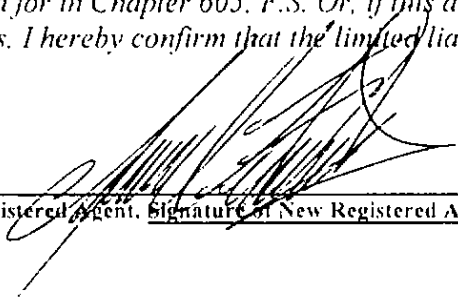
33145

*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, 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>	<u>Type of Action</u>
AMBR	CRISTIAN D FLORES	2350 SW 27 <sup>th</sup> Ave Apt 505 MIAMI, FL. 33145	<input checked="" type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
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