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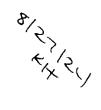
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## **COVER LETTER**

Div	ision of Corp	orations		
SUBJECT:	YANSE, LL	C		
SOBJECT.		Name of Limi	ited Liability Company	
T1		15 ()		
The enclosed	Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return	all correspon	dence concerning this matter	to the following:	
		NICANOR GONZALEZ		
			Name of Person	
			Sonzalez  Name of Person  Firm/Company  COURT  Address  ORIDA 33183  City/State and Zip Code yahoo.com mail address: (to be used for future annual report notification)  tter. please call:  at (	
		6715 SW 136 COURT		
			Address	
		Name of Limited Liability Company  mendment and fee(s) are submitted for filing.  ence concerning this matter to the following:  NICANOR GONZALEZ  Name of Person  Firm/Company  6715 SW 136 COURT  Address  MIAMI , FLORIDA 33183  City/State and Zip Code  cubanito999@yahoo.com  E-mail address: (to be used for future annual report notification)  cerning this matter, please call:  at (786 ) 2096004  Area Code  Daytime Telephone Number  following amount:  S30,00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)  Certificate of Status & Certificed Copy  (additional copy is enclosed)		
			City/State and Zip Code	
	City/State and Zip Code cubanito999@yahoo.com			
		E-mail address: ()	to be used for future annual report no	tification)
For further in	nformation co	ncerning this matter, please ca	all:	
NICANOR	GONZALEZ			
	Name of	Person		ne Telephone Number
Enclosed is a	check for the	following amount:		
<b>■</b> \$25.00 F	Filing Fee		Certified Copy	Certificate of Status & Certified Copy
	tetura a e e e .		6	

Mailing Address:

TO:

Registration Section

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

ited Liability Compa (A Florida Limited)	iny as it now appea Liability Company)	rs on our records.)	
Liability Company	were filed on 12	2/23/2020 and assigned	
lowing:			
of the limited liab	ility company h	ere:	
words "Limited Liabi	lity Company," the	designation "LLC" or the abbreviation "L.L.C."	
cable:			
Principal office address MUST BE A STREET ADDRESS)		COURT	
	MIAMI, FLO	RIDA 33183	
	6715 SW 136	COLIRT	
Mailing address MAY BE A POST OFFICE BOX)		MIAMI, FLORIDA 33183	
		(1571 33103	
ess here:		ecords, enter the name of the new registe	
6715 SW 1367	COURT		
0713 3 W 130 C		rida street address	
MIAMI		Florida <sup>33183</sup>	
	City	Zip Code	
	lowing:  of the limited liab  words "Limited Liabi  cable:  ET ADDRESS)  registered office:  ess here:  NICANOR GO  6715 SW 136 G	words "Limited Liability Company," the cable:  ET ADDRESS)  6715 SW 136 C  MIAMI , FLOR  FROM MIAMI , FLOR  Tegistered office address on our ress here:  NICANOR GONZALEZ  6715 SW 136 COURT  Enter Flor  MIAMI	

## 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>	Name	Address	Type of Action
MGR	YISSET VIGIL	7077 SW 152 PLACE	□Add
		MIAMI, FL 33193	■Remove
			□Change
MGR	NICANOR GONZALEZ	6715 SW 136 COURT	<b>≅</b> Add
		MIAMI , FLORIDA 33183	□Remove
			□Change
			□ Add
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fective date, if other than n effective date is listed, the date ote: If the date inserted in the cument's effective date on the	must be specific and is block does not i	d cannot be prior to meet the applica	o date of filing or mo	(opti re than 90 days afte requirements, th	r filing.) Pursuant	to 605.0207 (3)(b) be listed as the
ecord specifies a delayed effo is filed.	ective date, but not	t an effective tin	ne, at 12:01 a.m. o	n the earlier of: (	o) The 90th day	y after the
		2024				~
AUGUST 13						124 AUS 23

Filing Fee: \$25.00

Typed or printed name of signee