

h21 000208947

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

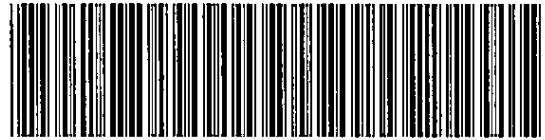
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2022 JUN 24 PM 1:25
SECRETARY OF STATE
TALLAHASSEE, FL

FILED



COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BIGGER MONTHLY PAYMENT 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:

SCOTT VILLANUEVA

Name of Person

STEVEN H. HIBBE, P.A.

Firm/Company

1430 S. DIXIE HIGHWAY, SUITE 313

Address

CORAL GABLES, FLORIDA

City/State and Zip Code

cl@yachtcounselor.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CAROL LOPEZ

305

375-0966

at (_____) _____

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED
2022 JUN 24 PM 1:22
SECRETARY OF STATE
TALLAHASSEE, FL

BIGGER MONTHLY PAYMENT LLC

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

The Articles of Organization for this Limited Liability Company were filed on 05/05/2021 and assigned
Florida document number L21000208947.

This amendment is submitted to amend the following:

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

ALEGRIA VENTURES 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)

16684 Calneva Dr.

Encino, CA 91436-4166

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

16684 Calneva Dr.

Encino, CA 91436-4166

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:

STEVEN H. HIBBE, P.A.

New Registered Office Address:

1430 SO. DIXIE HIGHWAY, SUITE 313

Enter Florida street address

CORAL GABLES

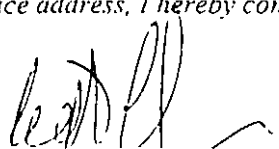
City

Florida 33146

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	JULIAN ZAGUEDOUN	4000 Hollywood Blvd Ste 285-S	☐ Add
		Hollywood, FL 33021	☒ Remove
			☐ Change
AMBR	RICHARD FUSON III	16684 Calneva Dr.	☒ Add
		Encino, CA 91436-4166	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

[illegible]

F. Effective date, if other than the date of filing: JUNE 14, 2022 (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated _____,

Signature of a member or authorized representative of a member

JULIAN ZAGUEDOUN

Typed or printed name of signer

Filing Fee: \$25.00