

121000356802

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

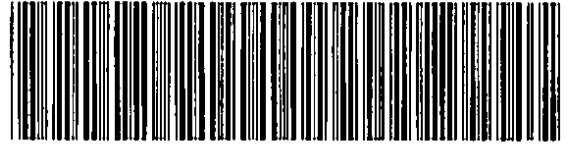
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRET
TALLAHASSEE, FL

2021 NOV 16 PM 6:30

F. J. P.

BRUCE
DEC 03 2021

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Property And Assets Records Office 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:

Carmelo A. Luis Camacho
Name of Person
Property And Assets Records Office LLC
Firm/Company
872 Kentucky Woods Lane East
Address
Orlando/FL 32824
City/State and Zip Code
hapyin121314@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carmelo A. Luis Camacho at (407) 3717272
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

RECEIVED
TALLAHASSEE, FL
2021 NOV 16 PM 6:36

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

Property And Assets Records Offcie 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 08/09/2021 and assigned Florida document number L21000356802.

This amendment is submitted to amend the following:

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

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Carmelo A. Luis Camacho

New Registered Office Address:

872 Kentucky Woods Lane East

Enter Florida street address

Orlando

Florida

City

32824

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

2021 NOV 16 5 06 PM
TALLAHASSEE
STATE OF FLORIDA

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>
MGR	Carmelo A. Luis Camacho	872 Kentucky Woods Lane East Orlando, FL 32824	<input checked="" type="checkbox"/> Add
		Carmelo Camacho	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Amandha V. Perez Luis	872 Kentucky Woods Lane East Orlando, FL 32824	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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 STATE OF FLORIDA
 TALLAHASSEE
 SECRETARY OF STATE

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

Carmelo A. Luis Camacho accepts appointment as the Registered Agent.

Carmelo A. Luis-Camacho accepts appointment as MGR.

Amanda V. Perez-Luis accepts appointment as AMBR.

2021 NOV 16 PM 6:38
SECTION 506.101
FALL RIVER, MASS., 01937

11-16-21

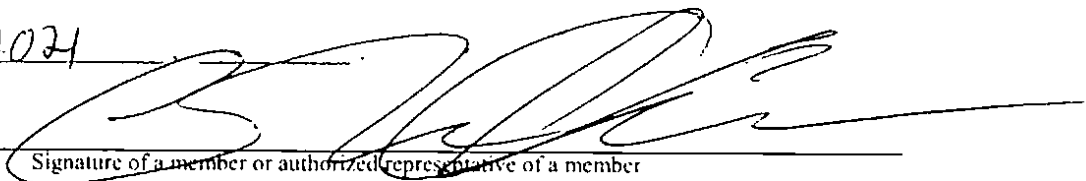
E. Effective date, if other than the date of filing: _____ (optional)

(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 11/12/2021



Signature of a member or authorized representative of a member

Carmelo A. Luis-Camacho AKA Carmelo Ca.
Typed or printed name of signee