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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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10/27/23--01040--018 \*\*?5.00



## **COVER LETTER**

Division of Cor			
MACHA I.			
SUBJECT.	Name of Lim	ited Liability Company	
The section of Amelohom of	A day and for (a) one gub	mitted for filling	
	Amendment and fee(s) are sub	•	
Please return all correspo	ondence concerning this matter	to the following:	
	Jonathan Taboada		
		Name of Person	· <del></del>
	ZenBusiness INC		
		Firm/Company	
	336 E. College Ave Suite	301	
		Address	
	Tallahassee, FL 32301		
		City/State and Zip Code	<del></del> -
	fulfillment@zenbusiness.co	om to be used for future annual rep	ort notification)
For further information of	concerning this matter, please co		
	concerning one matter. product of	844 493-6	(2.10)
c/o ZenBusiness INC  Name of Person		at ()	Daytime Telephone Number
Name o	ii Person	Area Code	Daytime Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Add	
Registration S Division of C		•	on Section of Corporations
P.O. Box 632			re of Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MACHA LLC		
( <u>Name of the Limited Liability C</u> (A Florida Lir	Company as it now appears on our records.) mited Liability Company)	
The Articles of Organization for this Limited Liability Com Florida document number 1.22000358345	pany were filed on 12/19/2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	l liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u> </u>	
Enter new mailing address, if applicable:		,
Mailing address MAY BE A POST OFFICE BOX)		<del>-</del>
		•
B. If amending the registered agent and/or registered of	ffice address on our records, <u>enter the i</u>	name of the new registe
gent and/or the new registered office address here:		'. 
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	City	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 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>	Address	Type of Action
AMBR	Juan Jose Soto	7911 NW 105 AVE	□ Add
		Doral, FL 33178	□Remove
		US	<b>⊒</b> Change
AMBR T	Tessia Soto	7911 NW 105 AVE	□Add
		Doral, FL 33178	□ Remove
		US	<b>≡</b> Change
AMBR	irma leticia ramirez hernandez	7911 NW 105 AVE	<b>=</b> Add
		doral, FL 33178	: □Remove
		US	: `` ☐Change
			□Change
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ffective date, if other than the d an effective date is listed, the date must b lote: If the date inserted in this bloc ocument's effective date on the Dep	be specific and cannot be price ik does not meet the appl	icable statutory filing re	(optional than 90 days after filing equirements, this dat	g.) Pursuant to 605.0207
record specifies a delayed effective is filed.	date, but not an effective	time, at 12:01 a.m. on	the earlier of: (b) T	he 90th day after the
12/19 ated	2023	<del></del> ·		
· · · · · · · · · · · · · · · · · · ·				
/s/juan jose soto				
/s/juan jose soto	ignature of a member or aut	horized representative of	a member	

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