L23000002943

(Re	equestor's Name)	
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(0)	,	
PICK-UP	WAIT	MAIL MAIL
(Bo	usiness Entity Name)	
	ocument Number)	
(5		
Certified Copies	Certificates of	of Status
Special Instructions to Fil	ing Officer;	
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Office Use Only



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DIRECTOR'S DEFICE DIVISION OF LORPORATION TALLAHASSEE, FLORIDI RECEIVED 2123 NOV | 14 PM | 12: 38

A. BUTLER NOV 14 2023

COVER LETTER

Registration Section

TO:

Division of Corp	porations		
SUBJECT: P7	otuces and be	toils ULC	
<u> </u>	Name of Limit	ed Liability Company	
The enclosed Articles of .	Amendment and fee(s) are subr	nitted for filing.	
	ndence concerning this matter t	_	
	3		
	Meriam Es	Asanc	
	7	Name of Person	
		Firm/Company	
	37326 Geniu	is cx	
		Address	
	LADY Lake F	City/State and Zip Code	
	·	City/State and Zip Code	
	E-mail address: (o be used for future annual report notif	fication)
For further information of	oncerning this matter, please ca	all:	
		or ()	
Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	\$30.00 Filing Fee &	☐ \$55.00 Filing Fec &	₩ \$60.00 Filing Fee,
_ 323.00 rung ree	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre		Street Address:	
Registration Division of C		Registration Sec Division of Cor	
P.O. Box 632		The Centre of T	
Tallahassee,	FL 32314	2415 N. Monro Tallahassee, FL	e Street, Suite 810
			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

FILED

AJ Stucio o	of Details (LC	2023 NOV 114	PM 1:51
(Name of the Limite	d Liability Company as it now appears on our A Florida Limited Liability Company)	records.)	 [[STATE
The Articles of Organization for this Limited Li-	ability Company were filed on <u>Jacoba</u>	45.2023	and assigned
Florida document number <u>L 23000002</u>	143		_
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liability company here:		
The new name must be distinguishable and contain the we	ords "Limited Liability Company," the designation	on "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applica	able:		
(Principal office address MUST BE A STREE	T ADDRESS)	·	
	 .		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE I			<u>.</u>
indiana unuress MATE BEAT OST OFFICE I			
	••••	······································	
B. If amending the registered agent and/or reagent and/or the new registered office address	egistered office address on our records. <u>s here</u> :	enter the name o	of the new registered
Name of New Registered Agent:	Menam Espinoza		
New Registered Office Address:	37326 Genius Ct Enter Florida stree	t address	
	LADY LAKE	, Florida <u>3</u> 2	159 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>	Name	Address	Type of Action
Masi Ambi	Alberto JASSO	37326 Genius (+ 1004) LAKE	□Add
HINOK		<u>C1.32159</u>	Remove
			Change
MGR C	Meliam Espinoza	37326 GRAIUS CT	MADA
		LAQUILAKE FI 32159	□Remove
			□Change
			□Add
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(If an eff Note:	ve date, if other than the date of filing:
ne recor ord is fil	I 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 ed.
Dated ¹	Navember 14 , 2023.
	Signature of a member or authorized representative of a member
	organisate of a memory of authorized representative of a memory