

(Requestor's Name)
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(City/State/Zip/Phone #)
(2.1).2.2.2.2.2,
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(Business Entity Name)
(Document Number)
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COVER LETTER

Registration Section

Division of Corporations

TO:

SURVEYF	Y					
SUBJECT:	Name of Lim	ited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return all correspo	endence concerning this matter	to the following:				
	ANDRES PEDRAZA					
		Name of Person				
	SURVEYFY					
		Firm/Company		()	~	
	9555 SW 175th Terrace, S	UITE 220		골병	023 09	
		Address		·-! [] ! ::-		
	Palmetto Bay,FL, 33157			13.50 20.00 13.00	2023 OCT 20 AM 10: 02	
		City/State and Zip Code				
	apedraza@surveyfy.net			<u></u>	0.	
	E-mail address: (to be used for future annual report notif	ication)	199	12	
For further information c	oncerning this matter, please c	all:				
Andres Pedraza		305 8740509 at ()				
Name o	f Person	Area Code Daytime	Telephone Number			
Enclosed is a check for t	ne following amount:					
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Statu:		
Mailing Address Registration : Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Corp The Centre of T 2415 N. Monroe	porations allahassee	10		

Tallahassee, FL 32303

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

ARTICLES OF	AMENDMENT	د	
	O DRGANIZATION		
O	F	17. S	
SURVEYFY			
	ent is submitted to amend the following: ing name, enter the new name of the limited liability company here: nust be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC." principal offices address, if applicable: 9555 Southwest 175th Terrace, suite 220.		
The Articles of Organization for this Limited Liability Company Florida document number 1,23000308588	were filed on solve says	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
		11.00	
The new name must be distinguishable and contain the words "Limited Liabi			
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)	Palmetto Bay, FL. 3317		
Entar now mailing address if applicables	9555 Southwest 175th T	Cerrace, suite 220,	
(Mailing address MAY BE A POST OFFICE BOX)	Palmetto Bay, FL, 3317	7	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records.	enter the name of the new registered	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida stree	t address	
	City	Zip Code	
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my du provided for in Chapter	ties, and I am familiar with and r 605, F.S. Or, if this document is	

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>	Address	Type of Action
MGR	GUERRERO, GUILLERMO A	682 EAST 21 ST STREET, HIALEAH, FL, 33013	= Add
			□Remove
			□Change
			🗀 Add
			□Remove
			□Change
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			□Remove
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Fective date, if other than the date of filling: (optional) n 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 605.02 tes: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed cument's effective date on the Department of State's records. eccord 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 filed. Signature of a member or authorized representative of a member.			
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Signature of a member or authorized representative of a member	ted October 17th	2023	
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		July Colonia (Colonia)	

Filing Fee: \$25.00